DOCUMENT RESUME

ED 023 139

CG 003 138

By-Neff, Walter S.; And Others

A Follow-Up Counseling Program. A Study of the Influence of Continued Counseling on the Employability of Disabled Workshop Trainees. Final Report.

Jewish Occupational Council, New York, N.Y.

Spons Agency-Social and Rehabilitation Service (DHEW), Washington, D.C.

Pub Date Sep 68

Note-154p.

EDRS Price MF-$0.75 HC-$7.80

Descriptors-*Demonstration Projects, Group Counseling, Mentally Handicapped, Neurologically Handicapped, Physically Handicapped, *Rehabilitation Counseling, *Vocational Rehabilitation

The essential question to which this research and demonstration project was directed was whether disabled trainees who received a vocational rehabilitation service with a substantial workshop component, and who were helped thereby to enter the labor market, would profit from a subsequent counseling service. It was originally hypothesized that such a post-program service would help the client maintain his employment once he had been assisted to enter or re-enter the labor market. The findings support a conclusion that the introduction of an experimental variable of post-program counseling results in modest but statistically significant differences on three maintenance of employment indices between the experimental and control groups. In general, it might be said that the trainees increased their employability by about one-fifth of the amount which might be expected without the extended counseling service. In terms of persons, given an experimental sample of 307 individuals, it can be argued that 40 or 50 of these clients might not have obtained any substantial vocational success without the experimental program. (AUTHOR)

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION POSITION OR POLICY.

JOC

Jewish Occupational Council

FINAL REPORT OF A NATIONAL RESEARCH AND DEMONSTRATION PROJECT

A FOLLOW-UP COUNSELING PROGRAM

September 1968

CG 003 138

IMPLICATIONS FOR VOCATIONAL REHABILITATION

1. The rehabilitation process cannot be considered complete merely in terms of a specified rehabilitation service, but should include various procedures which will facilitate transition to the world of work. The results suggest that, for many clients, entry to employment is a process rather than a single act and many clients will need continued support for an extended period of time.

2. Certain disability groups appear more dependent on such a continuing process than do others. The severely emotionally disturbed and those with neurological ailments apparently require a prolonged process of intensive counseling support. A lengthy and continued counseling process seems less necessary for the mentally retarded, the physically disabled and the disabled aged.

Mentally retarded clients require intensive initial job counseling and job preparation, but a somewhat shorter period of personal counseling to ensure job maintenance.

For the physically disabled (excluding those with neurological disorders) and the disabled aged, the primary needed service appears to be careful placement, and re-placement as necessary.

3. It is suggested that post-service counseling be utilized routinely for approximately a six-month period after a direct rehabilitation service concludes and then re-evaluated in regard to the need for continuing service. Individual cases may require more, or less, of this amount of time.

4. Placement procedures should be built directly into a workshop program, so that this process begins while the client is still undergoing work adjustment training.

5. Such matters as the role of family members and employers in contributing to the vocational adjustment of clients appear to justify attention in future studies.

6. Group counseling appears to be an effective device to minimize certain problems of socialization which may impede vocational adjustment.

7. Since rehabilitation clients tend to be multiply disadvantaged, vocational service cannot take place in a vacuum. To be effective, rehabilitation counseling should be coordinated within a broad constellation of other services, bearing on family organization, living arrangements, medical treatment, and the like. Whether this requires additional kinds of professional personnel (e.g. vocationally oriented social workers), or broader training for present counselors, is a matter which will take us too far afield.

8. In view of the complex problems encountered in the study, it seems likely that continued counseling services to the handicapped requires experienced and well-trained rehabilitation counselors.

A FOLLOW-UP COUNSELING PROGRAM

A Study of the Influence of Continued Counseling on the Employability of Disabled Workshop Trainees.

by

Walter S. Neff, Ph.D.
Beatrice Novick, M.A.
Bernard Stern, M.A.

FINAL REPORT

September 1968

This investigation was supported, in part, by a research and demonstration grant, number RD 1698-G, from the Social and Rehabilitation Service, Department of Health, Education and Welfare, Washington, D. C.

JEWISH OCCUPATIONAL COUNCIL
150 FIFTH AVENUE
NEW YORK CITY

ED023139
CG 003 138

FOREWORD

In recent years the rehabilitation workshop has come into its own as an effective instrument for moving severely handicapped persons from a state of idleness and dependency toward self-sufficiency and productivity. Lay and professional leaders, on the national and local levels, have recognized the usefulness of this professional instrument of rehabilitation and substantial funds have been allocated for the purpose of the construction, renovation and improvement in the operation of such shops and their programs. Nevertheless, when the proposal for this project was originally developed in 1964, relatively little attention had been paid to the career development of the graduates of workshop programs during the critical period of entry into the labor market. When the project's Research Consultant, Dr. Walter S. Neff, first conceived of a study of the relationship between gains made during a workshop rehabilitation program and the ability of the client to sustain these gains upon actual entry or reentry into the labor market, he turned to the JOC and its member agencies, the Jewish Vocational Services, as the vehicle for translating this idea into reality.

The Jewish Vocational Service movement, while tracing its roots as far back as the turn of the century in some localities, became firmly established during the Great Depression of the 30's, with the recognition by the organized Jewish communities in a number of cities that discrimination in employment and in higher education was a problem of very serious dimensions to its members. Most of these agencies were organized at that time. Immediately after World War II, several other Jewish Vocational Service agencies were founded, this time in response to the pressures that had been built up by the widespread immigration to the United States and Canada of persons whose lives had been scarred by concentration camp experiences and the barbarities committed by the Nazi regime in Europe. Hence, many persons coming to the agencies were emotionally and physically handicapped. The JVS's soon became interested in rehabilitation techniques and approaches. This practice was built on a solid foundation of knowledge and understanding of the counseling and job placement processes previously worked out by the agencies, especially with those who were vulnerable to life's vicissitudes. While the sheltered workshop programs were originally established as a means of assisting older Jewish persons and emigres who were unable to adjust to the normal demands of the open labor market, its potentialities for helping other persons as well, were soon recognized by the leaders of these agencies.

Thus, during the 1950's, the JVS's, following the example of the Chicago JVS, began their pioneering experiments with the use of the sheltered workshop as a therapeutic device for many handicapped persons, especially those with mental and emotional disabilities. Later in the same decade, one of these agencies (The Federation Employment and Guidance Service of New York City) utilized a workshop as an important component in an integrated rehabilitation and placement service to older, disabled persons. The State and Federal departments of rehabilitation recognized the value of these experiments and the basic services which were evolving therefrom, and began to contribute to the support of these specialized rehabilitation programs, provided that they were made available to the communities on a non-sectarian basis. At the same time, all of these agencies continued to be responsive to the special needs of Jewish persons in the area of vocational adjustment and continued to receive support from the Jewish community to carry out these aspects of their programs. Thus, the typical JVS is a concrete embodiment of the collaborative efforts of the private and public sectors of our society. A wide variety of services have been developed and are reviewed critically at regular intervals in order to make them responsive to the changing needs of society.

The image which these agencies have established in their localities includes a number of important components:

1. A concern with and respect for the unique personality of the individual client.
2. A high standard of service to the community.
3. A careful adherence to the requirements of excellence in the professional disciplines of psychology, counseling, rehabilitation, and social work, each of which has made crucial contributions to their resources.
4. A willingness to serve the hard-core and the severely disabled, even when the prognosis for success is guarded.
5. A desire to experiment and to try new approaches, and to adapt the agency, both structurally and functionally, to changing conditions.

Many of these agencies have engaged on their own in important research and demonstration programs with various disability groups, including the mentally retarded, the emotionally disturbed, the deaf, the disabled-aged, the neurologically impaired, the delinquent, the narcotic addict, and the socially and educationally disadvantaged. Some of these projects were based on prototypes established by other JVS's, but none were implemented along collaborative lines. Dr. Neff's proposal to venture into an area in which little information of a systematic nature had been previously gathered, suggested an exciting new dimension in research and demonstration: a common research design, carried out simultaneously in different localities under uniform conditions. The result was a national program in which 10 of the 25 Jewish Vocational Service agencies were invited to participate, because they met the basic requirements of the project design and could supply the service components to an adequate sample of clients. Bringing together these agencies under this common design and in a single project organization, was made possible by the existence and experience of the Jewish Occupational Council (JOC).

The JOC, organized in 1939, is the national coordinating, consultative and central service agency to the Jewish Vocational Services throughout the United States and Canada. It has served as the instrumentality for bringing all of its member agencies together in matters of common concern. It maintains a clearing house on questions of policy and practice, organizes and conducts regular conferences for vocational service professionals and executives, conducts surveys, engages in national research programs and has an active publications and statistical reporting program. It also serves as a recruitment and referral center for counselors, psychologists and trained rehabilitation personnel needed by its member agencies, and acts as their representative on national and international levels with other Jewish agencies, governmental bodies and professional associations.

The JOC, therefore, was given the responsibility to work out the details of the project proposal and to take charge of the administration and supervision of the activities of all of the participating agencies. While respecting the autonomy of the participating agencies, this national program was operated as a single administrative unit. Because of the nature of the relationships which had developed between JOC and the local JVS's during the past 30 years, the project was able to enlist the cooperation of the professional, clerical and supervisory staff assigned to it by each participating agency. Project staff members operating within each JVS gave of themselves freely and fully and continue to show great interest in the results.

This unique and exciting venture would not have been possible had it not been for the wholehearted cooperation and support of 10 State Divisions of Vocational Rehabilitation and the Social and Rehabilitation Service of the U. S. Department of Health, Education and Welfare.

The original proposal was reviewed and passed upon by each DVR Director in the State where the participating JVS was located. Since the JOC is physically located in New York City, an especially close relationship was established with the New York State Division of Vocational Rehabilitation and many hours were spent with key officials of that office, both in going over the original conceptions and in assessing the progress of the project. Finally, without the great interest, generous support and unstinting assistance of the Social and Rehabilitation Service and many of its staff members, the project never would have evolved as readily as it did, nor would it have been as solid in its implementation. Not only officials of the Division of Research and Demonstration, but others in the Regional Offices, especially those of Region No. II, were freely available to our staff.

Thus, this final report of a three-year national research and demonstration project is the culmination of an organic partnership, locally and nationally within the voluntary sector, and on the State and Federal levels in the public sector.

We hope that the findings reported herein will be of genuine value to all of the partners in this enterprise and to the field of vocational rehabilitation as a whole, especially to the handicapped people on whose behalf we all labor.

Benjamin S. Loewenstein
Chairman of the Board
The Jewish Occupational Council

ACKNOWLEDGMENTS

This document would not be complete without mention of the many persons who helped make this project a reality. Beginning with the first planning stages we received helpful suggestions and criticisms which strengthened and added to the original conception. The same generous spirit was evidenced throughout the operation of the program. We gratefully acknowledge with sincere thanks the giving of their time, their sound advice and continuing encouragement to the following leaders in the field of rehabilitation some of whom, while not associated with the project officially, were nevertheless a part of it in the finest sense of that term.

Bernard Stern
Project Director

SOCIAL AND REHABILITATION SERVICE, DEPARTMENT OF HEALTH, EDUCATION AND WELFARE

Miss Mary Switzer, Administrator

THE DIVISION OF RESEARCH AND DEMONSTRATION GRANTS

James F. Garrett, Ph.D., Assistant Administrator
William M. Usdane, Ph.D., Chief
Joan Criswell, Ph.D., Assistant Chief
Nathan E. Acree, Executive Secretary, General Research Study Section

REGIONAL OFFICE II

Salvatore G. DiMichael, formerly Regional Representative (currently, Director, Institute for Crippled and Disabled)
Anthony S. DeSimone, Acting Associate Regional Commissioner for Rehabilitation Services

DIVISION OF VOCATIONAL REHABILITATION, STATE OF NEW YORK

Adrian Levy, Assistant Commissioner for Vocational Rehabilitation
Arthur Pawlowski, Senior Research Analyst
Sol Richman, Office of Statewide Planning for Vocational Rehabilitation Services
Louis Saltzman, District Supervisor, New York City

STATE DIRECTORS OF VOCATIONAL REHABILITATION

California	Warren Thompson, Director, Department of Rehabilitation
Illinois	Alfred Slicer, Director, Division of Vocational Rehabilitation

STATE DIRECTORS OF VOCATIONAL REHABILITATION (Continued)

Kansas	Roger H. Triplett, former Director, Division of Vocational Rehabilitation Ronald E. Pribyl, current Director, Division of Vocational Rehabilitation
Massachusetts	Francis A. Harding, former Commissioner of Rehabilitation John Levis, current Commissioner of Rehabilitation
Michigan	Dr. Ralf A. Peckham, State Director, Division of Vocational Rehabilitation
Missouri	Joy O. Talley, State Director, Division of Vocational Rehabilitation
New Jersey	Mrs. Beatrice Holderman, Director of Rehabilitation Commission
Pennsylvania	Charles L. Eby, Director, Bureau of Vocational Rehabilitation
Wisconsin	Adrian E. Towne, Assistant Director for Vocational Rehabilitation

THE DIRECTORS OF THE JEWISH VOCATIONAL SERVICE AGENCIES

Boston	Simon Hoffman, Ed.D.
Chicago	William Gellman, Ph.D.
Detroit	Albert Cohen
Kansas City	Bertram Brant
Los Angeles	Morris Grumer
Milwaukee	Michael Galazan
Newark	Joseph Weinberg
New York	(Federation Employment and Guidance Service) Roland Baxt
Philadelphia	Saul Leshner, Ph.D.
St. Louis	Harry Kaufer

AND

Dr. Meyer S. Gunther, Psychiatric Consultant, Chicago

Paul Lustig, Ph.D., Director, Training Program on Sheltered Work, University of Wisconsin

William H. Button, Research Director, Regional Research Institute, Cornell University

William J. Wasmuth, Ph.D., Project Director, Regional Research Institute, Cornell University

PROJECT STAFF

THE JEWISH OCCUPATIONAL COUNCIL CENTRAL RESEARCH STAFF:

PROJECT DIRECTOR - Bernard Stern, Executive Director of JOC, served as the applicant of record, assumed over-all responsibility for the program, supervised financial records, disbursed funds to the participating agencies and worked directly with the Executive Director of each JVS to guarantee adherence to project procedures.

PROJECT COORDINATOR - Beatrice Novick was responsible for maintaining regular contact with the agency project counselors and supervisors by mail, telephone and visits, for arranging special conferences with the project staff and in conjunction with the Research Consultant for developing forms and procedures for data gathering and preparing the progress and final reports.

RESEARCH CONSULTANT - Dr. Walter S. Neff, Professor of Psychology at New York University, and Consultant to JOC, prepared the original proposal, met at regular intervals with the central staff to set up procedures, review data and consider future plans, guided the preparation of the progress reports and prepared the statistical findings and conclusions for the final report.

RESEARCH ASSOCIATE - Mrs. Phyllis Syetta was responsible for recording monthly statistical reports from the agencies, setting up a coding system, preparing statistical reports and preliminary statistical charts for machine processing.

SECRETARY TO THE PROJECT DIRECTOR - Mrs. Lillian Unterman was responsible for sending out correspondence and financial reports prepared by the Director.

PROJECT SECRETARY - Mrs. Miriam Feuer, who served in this capacity for the major part of the project, was responsible for all clerical and secretarial work for the project coordinator and research associate.

DATA-PROCESSING CONSULTANT - Dr. Jacob Cohen, Professor of Psychology at New York University, functioned in the project chiefly as a consultant in some of the statistical procedures.

SOCIOLOGICAL CONSULTANTS - Dr. Irving Gellman, Associate Professor of Sociology at New York University and Dr. Sherwood B. Slater, Assistant Professor of Sociology at Emory University, assumed responsibility for sociological observation at several JVS workshops.

THE JEWISH VOCATIONAL SERVICE AGENCY STAFFS:

Each agency staff consisted of a half time counselor, (or the equivalent) who was responsible for providing needed services to clients and preparing reports on caseload activity; a part-time supervisor responsible for supervising the local project program and a part-time clerical person to do necessary clerical work in preparing statistical and written reports.

PROJECT STAFF

BOSTON:	Counselor	- Maurice Chefitz
	Supervisor	- Dr. Simon Hoffman
CHICAGO:	Counselors	- Mrs. Marian Beardsly
		Miss Sondra Case
	Supervisor	- Gerald Silverstein
		Terrence Sokey
DETROIT:	Counselors	- Mrs. Rita Raz
		Mrs. Ada Heavenrich
		Dr. Andrew Glatter
		Kalman Tillem
		Samuel Goldstein
	Supervisor	- Eugene Greenspan
KANSAS CITY:	Counselors	- Samuel J. Carpenter
		Gerald Rempel
		Clair L. Kuszmaul
		Montgomery Beard, Jr.
		Leslie Alper
	Supervisor	- Bertram Brant
LOS ANGELES:	Counselor	- Edgar Hoefer
	Supervisor	- Morris Grumer
MILWAUKEE:	Counselors	- Mrs. Shirley Krauss
		Kenneth Fisher
		Jacob Cohen
	Supervisor	- George Gay
		Mrs. Violet Meiselman
NEWARK:	Counselor	- Morton Schwartz
	Supervisor	- Albert Ascher
NEW YORK (FEGS):	Counselor	- Manuel Posner
	Supervisor	- Joseph Shay
		Irving Barshop
PHILADELPHIA:	Counselors	- Erwin Springer
		M. C. Schellinger
		Michael Nassan
	Supervisor	- Ralph E. Chase, Jr.
ST. LOUIS:	Counselor	- Stanley Bryer
	Supervisor	- David Greditzer

TABLE OF CONTENTS

Page

FOREWORD III

ACKNOWLEDGMENTS VII

PROJECT STAFF IX

CHAPTER

I THE PROBLEM 1

II METHODOLOGY 10

III QUANTITATIVE RELATIONSHIPS : RESULTS I 18

IV QUALITATIVE ASPECTS OF THE COUNSELING PROCESS : RESULTS II 29

V ADDITIONAL PROJECT ACTIVITIES 57

VI DISCUSSION AND CONCLUSIONS 71

BIBLIOGRAPHY 81

APPENDIX I STATISTICAL TABLES 83

APPENDIX II FORMS FOR DATA COLLECTION 109

APPENDIX III FACILITIES 135

CHAPTER I

THE PROBLEM

PURPOSES OF THE PROJECT

The essential question to which this project has been directed is whether handicapped clients who have received a vocational rehabilitative service and who have thereby been helped to enter the labor market will profit from a subsequent counseling service.

The primary objectives of the study are:

1. to determine whether intensive counseling over an extended period would help clients who have completed workshop training to maintain employment.

2. to identify the characteristics of those clients who appear to require the continuation of professional services beyond workshop or immediate job placement following workshop.

Specific aims are:

1. to test out whether there is a difference between the employment status of those provided with intensive follow-up services and those not provided such services.

2. to find out whether there are critical periods when clients may need assistance in maintaining employment.

3. to discover whether there is an optimum period for continuing services, and whether this period differs among the four disability groups included in the program.

4. to find out whether there are differences in the types of problems encountered by clients in these disability groups and therefore in the types of services which they may require.

BACKGROUND

During the years of the Great Depression the JVS's were concerned with counseling youth, and job placement for all distressed members of the Jewish community. As the economic situation changed for the better, attention focused on the re-settlement of the refugee and on special programs for the aged, who were already beginning to face discrimination in employment. This quickly broadened into a general concern with all types of handicapped persons and, by the early 1950's, the JVS's were involved in serving these populations.

Beginning with the establishment of sheltered workshops to provide employment for older persons and hard core emigrés, who could not be absorbed by industry, they moved to the use of the workshop as an evaluation and therapeutic facility for preparing the disabled in general for employment in industry. Special programs and techniques were developed to meet the needs of an increasingly handicapped population, as the agencies became both a referral source for state rehabilitation agencies and participants in specialized rehabilitation programs with the support of the Social and Rehabilitation Service. These new programs were established on a non-sectarian basis.

Two of the agencies, Chicago and New York, developed unique rehabilitation programs, which were adopted by SRS as authorized rehabilitation procedures in their special fields (the emotionally disturbed and the older worker), and several of the other agencies have established such prototype facilities in their separate cities. A number of the JVS's have actively engaged in developing new kinds of rehabilitation programs for the mentally retarded, the school dropout, the handicapped teenager and more recently the socially deprived.

As was enunciated at the most recent NRA Conference (October 1967) by leaders in the field, the current concept of rehabilitation stresses human well-being and seeks to offer each individual the maximum opportunity for personal and family adjustment. This global outlook envisages varying goals for each individual. However, within the framework of vocational rehabilitation, the primary goal is job placement and the yardstick of successful adjustment remains stable employment. Although JVS's take a holistic view of each individual and have incorporated, either within their own facilities or through community agencies, comprehensive plans for service, their emphasis has always been on placement as the end result of all vocational endeavors.

In the initial process of screening for workshop service and later during the period of work evaluation and work adjustment, clients who cannot meet the criteria for employment either in the open labor market or in an extended-term workshop facility, are screened out and, where possible, referred to more appropriate services. It could thus be presumed that those who complete a rehabilitation workshop program are ready for employment. However, even the most optimistic reports indicate that a certain percentage of clients who receive rehabilitation services are not able to secure and/or maintain employment. In a report issued in 1964 SRA observed that only one fifth of those served in each of the years from 1961-1964 were rehabilitated (12).

Agency personnel have been made aware of the problem by the return of some individuals who seek help in finding jobs, through their practice of checking with employers and clients at regular intervals during the first year after closure, and by more formal follow-up studies. As early as 1955, only a few years after its workshop had been established, the Chicago JVS (5) did a follow-up study of clients served between July 1951 through December 1954 and found that approximately one half of the clients who completed the program were able to secure and keep employment.

In 1963 in a study made by the Detroit JVS (9), of 35 clients who had completed workshop training 1 to 2-1/2 years prior, it was noted that the results were similar to those of the Chicago JVS follow-up. Of the total sample, consisting of the aged, the emotionally disturbed and mentally retarded, 65% had achieved successful rehabilitation in private employment.

Some of the recent JVS Research and Demonstration Programs have included follow-up surveys either during the program, or shortly after termination, which bear out the problem of maintaining employment. A survey made by the Milwaukee JVS (11) in its program for the emotionally disturbed, revealed that, at the end of 4 months, 40 of 106 clients who had been placed were working. Although the follow-up period was short and the data incomplete, it was concluded that while placement did not seem to be a problem for this population, keeping the job was a problem for a certain percentage of clients.

In its program for the disabled aged, a survey made by the Milwaukee JVS (15) two months after the termination of the program disclosed that only 30% of 206 clients were employed in the community. A high percentage resigned or were laid off for other than health reasons, although health factors accounted for a considerable number of resignations and discharges. It was also noted that clients required from 1 to 8 placements on jobs.

Similarly a survey made during its program for the disabled aged by the Philadelphia JEVS (8) showed that at the end of 3 months, 40% of the males and 33% of the females had held their jobs less than three months. As in the case of Milwaukee, considerable effort was necessary to place clients, and many required several replacements.

Formal studies, which have been made a year or more after closure by JVS agencies and by other agencies dealing with populations served by state rehabilitation agencies, are summarized below.

CHICAGO JVS - The Success of a Rehabilitation Program (10)

In 1959 Neff conducted a follow-up study of clients of the Vocational Adjustment Center who had been discharged in the years 1956 and 1957. Interviews were conducted with clients in their homes a minimum of one year after direct service had terminated, by students of the School of Social Service Administration at the University of Chicago. The basic follow-up sample comprised 138 individuals who had completed workshop training and had been in the labor market for a period of from 12 to 24 months. The population tended to be multiply disabled, with more than half diagnosed as having emotional handicaps, with limited formal education, little or no previous work experience, and had been judged apparently unemployable by a public rehabilitation agency.

The major findings were that 68% of these clients were placed on jobs after leaving the workshop; of the clients placed, 35% worked all or most of the 12 month follow-up period; another 16% worked half to three quarters of the available time; the remainder from a few days to six months. There was an impression that clients who could not maintain employment might have benefited if they had continued to receive counseling service during their initial period in the labor market. It was also noted that clients with "impeding" families were less successful in holding jobs than those with families judged supportive or neutral.

FEDERATION EMPLOYMENT & GUIDANCE SERVICE, New York City

A final follow-up was built into the study titled: The Vocational Rehabilitation of Older Handicapped Workers (13). It was launched in September 1961, when the program had already been in existence for almost 3 years, and had served 738 clients. The follow-up group of 101 clients consisted of those currently employed and those unemployed who had held jobs subsequent to service. The duration of the current or most recent job was less than 7 months for one half of the group. Almost one half of the clients who had attained some level of employment were still employed at the time of the study. A high percentage of those who were unemployed, attributed this to working conditions which made too great demands, and to health reasons.

In its most recent program of disabled aged: Rehabilitating the Older Disabled Worker, (14) a follow-up study was made in 1966-67 of individuals who had been out of the project some 3-1/2 years subsequent to completion of rehabilitation training. A sample of 138 clients was interviewed, representing 74% of the clients who had been served. Of this sample 45 were employed in competitive employment, 6 in sheltered programs; 50 clients were no longer interested in work. Of those who were unemployed, 19 were still in the labor market.

About half of those still in the labor market were employed at the time of follow-up. The most common reported problem was that job demands were too heavy. Health was an important factor in voluntary withdrawals. There was found to be a rise in the number receiving Social Security benefits: 67% as compared to 48% at the time of acceptance into the program. (Much of this was attributed to earnings during participation in the program as well as in subsequent employment.) Part-time work, therefore, played an important role in the employed group, 52% of whom held such employment.

OTHER STUDIES

A SURVEY OF REHABILITATION FOLLOW-UP STUDIES (2)

In this survey, Bailey obtained data on 32 such studies, 26 of which were in regard to the general caseloads of state rehabilitation agencies. Data was obtained from the agencies by interview (rate of response 87%) and mail questionnaire (rate of response 57%) and covered the years from 1945 through 1964. No effort was made to analyze the studies, but it was noted that the trends were in the direction of a lower employment rate with more recent studies: 79.9% for the years 1961-1964 as against 87.2% for the years 1945-1949. Bailey notes that one possible reason for the downward trend might be that more severely disabled are being served and their employment stability is not as great as was true in the past.

Of the six special-group studies included in the report, relatively low employment rates were reported for groups involving cardiacs, epileptics, general patients not rehabilitated, dischargees from TB hospitals, patients of a rehabilitation program who had vocational goals and severely disabled workshop graduates. The lowest employment rate 40.6% was reported for the severely disabled workshop graduates.

DEPARTMENT OF REHABILITATION, PSYCHIATRIC FOLLOW-UP STUDY (4)

Although this study will not be completed until April 1968, its interim findings are of interest, since the follow-up which was provided by the California Division of Vocational Rehabilitation deals with ex-mental patients, who also form a large part of the clientele served by JVS's.

The experimental group in this study consisted of clients who received intensive assistance from specialist rehabilitation counselors stationed full time in 7 cooperating hospitals. After release and return to their home communities, they continued to receive on-going vocational rehabilitation from a rehabilitation counselor within that community. Another group of patients (control group), who did not receive rehabilitation services while in the hospital, were referred by community agencies and physicians directly to the field counselors. Identical records and follow-up interviews were kept on both groups of patients. Data thus far has been collected on 106 cases, closed between July 1, 1964 and June 30, 1965.

Results at the time of the report indicate that of clients referred for service while hospitalized, those seen within 4 weeks after leaving the hospital showed a higher rate of employment at follow-up than the group not seen within four weeks of release. Those clients whose cases were active with the Division of Vocational Rehabilitation a year or longer (differentiation not made between the Experimental and Control groups) had a higher rate of employment at the time of follow-up than those who were active less than a year. Almost 50% of those seen over a year were employed, 29% of those active less than a year were employed at follow-up.

Of the total group of clients employed at the time their cases were closed (40 individuals) 60% were employed at follow-up. Of those closed unemployed (66), only 24% were employed at the time of the follow-up interview. While a slightly higher percentage of those clients referred for service in the mental hospital were employed at time of follow-up, it was noted that this group seemed "sicker" than the group referred after hospitalization.

MINNESOTA STUDIES IN VOCATIONAL REHABILITATION

A follow-up study of placement success was made in May 1958 by the Industrial Relations Center of the University of Minnesota (7), to determine the current level of vocational adjustment of DVR rehabilitants selected from among cases closed between 1/19/53 and 12/30/57 and Employment Service applicants selected from among the active and inactive file within the preceding two years. Ninety-one interviews were held, 39 with the handicapped individuals themselves, the remainder with adult relatives. The majority of the individuals in the sample were physically handicapped.

Of the 91 individuals, 60 were employed full time, 19 were unemployed, 7 were employed part time and 5 were no longer in the labor force. It was found that the unemployment rate of 22% was considerably higher than in the labor force as a whole, which was 8.9% for the same period. The 60 individuals employed full time worked an average of 42.4 hours per week and earned an average of $75 per week. More than 2/3 of this group held jobs which were at the same level or higher than their usual occupations.

It was found that there was no statistically significant difference in employment status between the DVR and ES groups. About 1/5 of the handicapped persons interviewed did not like their jobs. The most frequently mentioned reason for liking or disliking a job was the type of work involved. The major difficulties of the physically handicapped individual in finding and holding jobs, as perceived by the interviewers, were employer resistance and the physical limitations imposed by the disability. It was suggested that there was a need for giving additional attention to counseling participation and job satisfaction of the physically handicapped. It was also felt that intelligent modifications of placement procedures would affect a change in employer resistance.

STUDIES MADE BY MENTAL HOSPITALS

There are a number of recent hospital studies, concerned with chronic mental patients, which stress the importance of vocational rehabilitation services for patients returning to the community. One of the most recent is the Five Year Follow-up Study of Chronic Hospitalized Mental Patients conducted at Vermont State Hospital (4). This study focused primarily on the effects of an in-hospital rehabilitation program on the adjustment of the patient in the community; it also studied the status of patients released to half-way houses as compared to those released directly to the community. Data were sought on their social and vocational adjustment and the influence of family. Among the key findings were the following: About two thirds of all chronic patients can be maintained in the community at effective levels of employment and functioning if sufficient transitional facilities and adequate aftercare treatment are supplied; the rehabilitation worker often becomes one of the central figures in the client's life; essential to any permanent success with chronic patients is effective aftercare treatment, the most important part of which may well be effective vocational counseling.

EMPLOYMENT EXPERIENCE AMONG 200 SCHIZOPHRENIC PATIENTS IN HOSPITAL AND AFTER DISCHARGE (16)

This is a report on a study conducted at the Veterans Administration Hospital at Brockton, Mass., comparing the work activity of 211 male schizophrenic veterans during hospitalization with their post-hospital employment experiences over a 6 month follow-up period. It was found that although 53% had participated in work activities on a regular basis during at least part of their hospitalization, only 47% (94 individuals) were employed at any time after their return to the community. Of this number, only 49 worked at a regular full-time job throughout the follow-up period. It was concluded that there was a need for greater use of special employment centers to aid in placement.

* * *

There has already been a recognition on the federal level and in some states that some clients cannot make the transition from workshop to private employment without continuing support. Many of the JVS's have worked out an arrangement with their respective state rehabilitation agencies which enables them to provide continuing service, varying from 2 months to a year, to clients deemed to need further help in making a vocational adjustment.

Selection of clients for such service is made on a case by case basis, determined by joint consultation between the JVS and DVR counselors. As yet, however, there is no uniform policy among the state rehabilitation agencies in regard to selection of clients and length of continuing service.

It would appear from the evidence that there is a need for guidelines in determining who can profit from continuing service, what the services should consist of, how long they should last. From the studies reviewed, there are indications that clients vary considerably in their ability to maintain employment and that there may be differences in the kinds of problems affecting the adjustment of the different disability groups. We do not yet know why some clients succeed, others fail, how clients maintain themselves on an everyday basis, or what specifically would help them to make the adjustment. Some of the studies seem to suggest that the initial placement may be the most important factor in ensuring stable employment for the physically handicapped, that continual replacement may be necessary for the older worker, that family attitude may be an important component in the eventual adjustment of the younger handicapped person. These unresolved issues suggested the formulation of a systematic study which would permit observation during an on-going period of continuing services to a group of handicapped clients, following completion of workshop training and initial placement.

RELEVANT RESEARCH STUDIES

At the time this project was undertaken there were no other programs of a similar nature. Since then the Arkansas Rehabilitation Service has undertaken a program--RD-2202-G "Intensive Follow-up Services for Marginal Workers." (1) in which it is attempting to demonstrate that there is a significant relationship between the provision of follow-up services and the continued employment of marginal workers. The program which began on 7/1/66 will terminate 6/30/68.

Referrals are received from the Arkansas field service office and other facilities in the county where it maintains a rehabilitation counselor. The marginal worker is defined as a rehabilitation client who has undergone vocational evaluation in an Arkansas Rehabilitation Service or received a comparable evaluation in another facility, has been provided the recommended rehabilitation services by an ARS counselor, has been determined to have few work skills and little or no work experience, has demonstrated inability to secure employment by himself, and is severely handicapped due to single or multiple disabilities.

Following placement, clients are assigned to the experimental or control group on an odd-even basis. The Experimental clients are receiving intensive services for a 12 month period following initial placement, and a close working relationship is being maintained with employers and family. Follow-up includes the entire spectrum of services offered by ARS, with emphasis on counseling directed toward job retention.

Those in the control group are given initial job placement, additional services not being provided unless at the client's request. Follow-up is made every four months to check on status.

Between 8/1/66 and 12/21/67, 101 clients were accepted for service and 64 were placed. More than half of the entire goup is classified as having a mental, psychoneurotic or personality disorder; 39 have a major disability of mental retardation; only 46 have any work history. One of the problems has been in receiving referrals. It is hoped to have a total caseload of 150.

Basically, the two programs are similar in structure. The major differences are: (1) that the rehabilitative services offered ARS clients may vary and do not necessarily include workshop training, (2) that all ARS applicants are unemployed at the time of referral, and (3) that initial job placement is not considered part of the follow-up process. It will be of interest to compare the outcomes of both programs.

FORMAL IDENTIFICATION OF PROJECT

1. The title under which the project was funded was: A Study of the Influence of Follow-up Counseling on the Employability of Disabled Workshop Trainees.

2. The chief source of funds for the project was The Social and Rehabilitation Service (SRS) of the U. S. Department of Health, Education and Welfare under project RD-1698-G.

3. The grantee organization was The Jewish Occupational Council of New York City.

4. The formal starting date of the Project was March 1, 1965 and its planned duration was for three years through February 29, 1968. The service portion of the program was completed by December 31, 1967. The research aspect and research utilization were extended through September 30, 1968.

5. The Project Director was Bernard Stern, Executive Director of The Jewish Occupational Council; the Project Coordinator was Beatrice Novick. Dr. Walter S. Neff, Professor of Psychology at New York University, served as the Research Consultant.

CHAPTER II

METHODOLOGY

A. PROJECT STAFF

The Jewish Occupational Council (JOC) was designated as the research center for the project. It provided the Central Research Staff, which formulated procedures, coordinated and supervised the program, and analyzed the data.

In each of the 10 participating Jewish Vocational Service agencies (JVS's) a half-time counselor (or the equivalent) provided the professional counseling and placement services to the clients in the project.

B. PROJECT PROGRAM

Design

The basic plan called for each JVS to provide intensive follow-up counseling services to a randomly selected caseload of 30 to 40 clients per year who had completed a workshop program and to compare their subsequent work behavior with that of a comparable control group.

Since the bulk of clients referred to the JVS agencies by the state rehabilitation offices are persons whose disabilities fall broadly into the areas of mental retardation, emotional disorder, psychosocial handicaps and problems related to aging, experimentals and controls were to be selected from among these disability groups.

In order to forestall deterioration of rehabilitation gains which might develop from a prolonged period of idleness, the service was to be offered to selected clients within a period of three months after workshop service had terminated, focusing on those problems which appeared to influence employment maintenance. Continued job placement and re-placement would be offered, as required.

One half of the graduates of workshop training were to be offered continuing follow-up service and the remaining half (controls) were to receive no service other than a periodic check as to their employment status.

Assignment of clients to the experimental (E) and control (C) groups was to be made on a random basis. At the time of acceptance into the workshop, clients were to be designated A or B on a consecutive basis. At the completion of the workshop stay, those designated A, who met the eligibility requirements, were to be selected for the experimental group; those designated B, who met the eligibility requirements, were to be selected for the control group. This procedure of consecutive assignment was designed to make the E and C groups substantially comparable on such variables as age, sex, previous employment, etc.

On the assumption that a half-time vocational counselor could carry a caseload of 30-40 project cases, it was estimated that the size of the E group across the 11[1] participating agencies would be 350 to 400 cases, with approximately the same number of cases assigned to the C group. Counselors would provide service to the E clients and submit data to the Central Research staff on number of jobs held, duration of successive periods of employment, duration of intervening periods of unemployment and similar indices of employment status on both the E and C groups.

The Central Research staff would develop procedures for gathering detailed information on the E and C clients of the study, with the objective of relating outcome to characteristics of clients, and would coordinate the efforts of the participating agencies.

Implementation

The project began on March 1, 1965, when the Project Coordinator assumed her duties. The first two months were essentially a tooling-up period, during which a research assistant and a secretary were added to the staff, larger quarters were secured, and arrangements were made for developing uniform procedures through a series of meetings with representatives of the participating agencies and with representatives of the New York State Division of Vocational Rehabilitation. Although the JVS's are basically similar in outlook and quality of professional services, there are differences in size, length and intensity of workshop experiences, and in the follow-up programs which they offer their clients, which necessitated establishing a common basis of operation.

Uniform Procedures

1. Counselor Assignment. Only experienced counselors were to be assigned and, where possible, the same counselor who served a client while he was in the workshop would carry out the continued counseling service. Either of two procedures were to be followed in filling this position:

   a. A half-time counselor would be assigned to the project.

   b. The equivalent of a half-time counselor would be distributed among several counselors, the maximum number being three. (The acute shortage of experienced counselors dictated this alternative in some cases, since in some areas it was not possible to fill the position except through a shifting of responsibility among staff personnel.)

2. Starting Date of Follow-up. Since procedures regarding termination of workshop service varied among the agencies, the starting date for follow-up was set to be within six months after the client left the workshop.

3. Selection Procedures and Criteria. This is discussed under POPULATION AND SAMPLE.

---

[1] One agency withdrew in January 1966.

As soon as agreement had been reached on uniform procedures, the agencies began recruiting for counseling personnel. Since this presented a serious problem for some communities because of the shortage of experienced counselors in the field, there was a considerable variation in the starting dates. Agencies began working on the project on the following dates:

Apr. 1, 1965	Boston
	Kansas City
	New York
	St. Louis
Apr. 19, 1965	Detroit
May 1, 1965	Milwaukee
	Newark
	Philadelphia
July 1, 1965	Los Angeles
Aug. 1, 1965	Chicago

The Central Research staff developed reporting forms, written procedures and definitions, which were codified in a Manual of Procedure and sent out to project counselors and supervisors as a ready source of reference.

As changes and additions were made during the project, memos were sent out to be added to the manual. Constant contact was maintained throughout the program through correspondence, telephone, visits to the agencies, and conferences with project counselors.

Data Collection

The following data were collected from each agency (See forms in Appendix II):

1. Form A: Monthly statistical-reporting form, indicating number of clients contacted and accepted for each group;
2. Form B: Monthly caseload sheet, indicating client and counselor activity;
3. Form C: Social data form, for each E and C client, filled out at time of acceptance;
4. Form D: Initial case summary for each E and C client, filled out at time of acceptance;
5. The Counseling Scale of the Scale of Employability for Handicapped Persons (developed by the Chicago Jewish Vocational Service) administered at the beginning and end of the program to each E client;
6. Form E: Six-month progress report for each E client;

7. Form F: Six-month progress report for each C client;

8. Form G: Brief Recording Form for Counseling Contact, filled out after each interview with E clients accepted into the program, beginning with April 1, 1966.

Modifications and Supplementations

Changes in Design

Modifications

The research design as outlined in the project proposal, remained substantially the same during the study. There were the following minor modifications:

1. Clients were selected not only from among those judged to have completed an assigned workshop program but also from among those who received a "substantial" workshop service. The latter was defined to be of at least 4 weeks duration.

2. Caseloads were to be 30-40 for the entire period and not per year as originally projected.

3. Since the agencies are essentially service oriented, provision was made to provide service to those clients in the control group who made a request for assistance beyond routine placement service. Such clients were, however, to be dropped from the control group.

4. Caseload accumulation. Caseloads were developed by selection of clients from among those already out of the workshop, who met the criteria, and by adding clients as they completed workshop training. It had been projected that each agency would develop E and C caseloads of 30 to 40 clients each by August 1966 so that the last clients accepted for service would have a minimum of a year's follow-up service. However, a few agencies encountered difficulties in meeting this deadline and the date for accepting new cases was therefore extended to November 1966.

5. Number of participating agencies. The program began with 11 JVS agencies. In January 1967, one of the agencies dropped out because of internal difficulties. Since the clients of this agency could not be followed until the end of the program, they are not included in the data analysis.

6. Continued participation of clients. By the end of the first year, it became apparent that there were some clients in the E caseload whose availability for employment was temporarily disrupted by return to the hospital for short periods of treatment, or return to the workshop for an additional period

of adjustment training, or by placement in a skill-training program. Since most of these clients became available again after a short period of treatment or training, the procedure was modified so that all clients remained in the E group until the end of the project period, with the proviso that continued contact be maintained, whenever possible, even when the client was temporarily not available for the labor market.

Supplementations

7. Analysis of Counseling aspects. Beginning in April 1966, a procedure was incorporated within the design to determine which clients need and can use counseling services, and whether there is a critical point at which intervention is most helpful. This feature of the study is based on an analysis of interviews with each client accepted into the E group since April 1966 and is described in Chapter IV.

8. In line with a request by SRS, provision was made for sociological observation at several of the JVS workshops. In the first year, two observers visited three workshops each, and, in the last year, one of the observers revisited the three which he had previously observed. These observations are reported on in Chapter V.

9. Four conferences were arranged for project counselors as the most feasible device for unifying staff through an interchange of experiences, providing a forum for discussion of common problems and insuring a uniform interpretation of procedures. The last conference was held just prior to the termination of the service program and was devoted to a final evaluation and recommendations in regard to follow-up counseling. This Conference is reported on in Chapter V.

C. POPULATION AND SAMPLE

1. Criteria for Screening and Selection

Population Pool

Subjects for the study were drawn from persons who had received a substantial workshop experience and had neither been deemed entirely unemployable nor employable only in sheltered workshop settings. The pool therefore consisted of clients who were expected to enter the unprotected labor market after their workshop experiences. In order to ensure that clients met the eligibility requirements, clients received final classification as to their employability at the end of their workshop stay. Clients who had already left the workshop and were drawn upon for inclusion in the program were classified in the same manner.

All clients were required to meet the following eligibility requirements:

Type of Handicap:

Clients were selected from among four major groups of disabilities: the mentally retarded, the emotionally disturbed, the physically handicapped and the disabled aged (55 or over).

Age:

The minimum age was 17.

Availability for Employment:

Clients had to be available for employment at the point of selection. Clients who completed workshop training and went into a training program which extended beyond 6 months after workshop were excluded.

Workshop Experience:

Clients must have completed work adjustment or a substantial part of work adjustment training. Since agencies differed in making a distinction between work evaluation and work adjustment, a period of work evaluation was considered as a substantial workshop experience if it were more than a period of diagnosis or assessment, involved exposure to the workshop milieu and lasted for four weeks or more.

2. The Sample

The total sample consisted of 523 clients--307 Experimentals and 216 Controls.[2]

Characteristics of Sample

Tables which provide the data described below are in Appendix I. Table B presents selected data in tabular form. The other tables provide a breakdown of subject characteristics by agency.

Sex (Table C)

Men outnumber women in both groups. In the Experimental group 59% were males, 41% females; in the Controls 63% were males, 37% females.

---

[2] The fact that the C group turned out to be only a little more than 2/3 of the size of E requires some explanation. It arises from the fact that most of the participating agencies devoted more energy to providing adequate counseling to Es than to maintaining follow-up contact with their C cases. As a result, contact with some of the latter was lost at the critical periods when follow-up information was to be sought. Also, a number of clients were lost to C because they voluntarily sought additional assistance from the agencies and were thus dropped from the control group.

Age (Table D)

The average age for the total sample is 35 years, with 2/3 of both the Experimentals and Controls falling between 20 and 55 years. Only 13% of the Experimentals and 16% of the Controls are over 55 years of age.

Marital Status (Table E)

Two thirds of the clients in both groups are single. The remaining third is married or was previously married.

Education (Table F)

Excluding the 15% who attended ungraded classes, the average educational level for both groups was 9 years of school. 37% of the Experimentals and 41% of the Controls had 12 or more years of schooling.

Disability (Tables N and O)

The two largest single categories of primary disability for both groups are the Emotionally Disturbed, Severe, and the Physically Handicapped. However, if both the Emotionally Disturbed, Severe, and Emotionally Disturbed, Mild, are grouped together, emotional disturbance is the largest single disabling factor, accounting for 54% of the Experimental and 45% of the Control clients.

An analysis of clients having secondary disabilities reveals that 35% of the Experimentals and 27% of the Controls have at least one secondary disability.

Previous Employment History

Employment Prior to Referral to JVS Workshop (Tables J, K, L)

Approximately 3/4 of the total sample were in the labor force, with an average of 12-15 months of unemployment. 36% of the Experimentals and 41% of the Controls held no jobs in a 24 months period prior to referral.

Employment Between Leaving Workshop and Acceptance for Follow-up (Table M)

During this period 63% of the Experimentals and 58% of the Controls had some employment. At the time of acceptance for follow-up 50% of both groups were employed.

D. THE SERVICE PROGRAM

The following definition of intensive follow-up was formulated to serve as a guide to the project staff:

> "In essence follow-up was conceived as being dynamic, vigorous and providing those dimensions of service which a client might need to become an employable member of society. To achieve this all the resources of the agency were to be made available to each client to the extent that he could make use of them.
>
> The basic services included individual counseling on a regular basis, special placement efforts as needed, employer contacts and interpretation of client needs when helpful, and involvement of medical, casework, psychological, psychiatric or any other services which might be required. Special services available at a particular agency, such as group counseling, were also to be utilized if required by an individual.
>
> Although it was recognized that client needs would vary, as an initial guide, personal contact with clients was to be maintained at least once every two weeks. Counseling was to focus on any problems which might threaten the client's adjustment on the job.
>
> In the early phases counseling would deal with a client's resistances and fears about handling job interviews and/or a job, earnings, relationships with co-workers and supervisors, appearance as it affected his job, family problems which might be interfering with his performance. As a client moves on, counseling might be concerned with a client's changing goals, a desire for advancement, realistic possibilities of training.
>
> In the final phases, for the client who is able to maintain himself on a job, counseling sessions would concentrate on increasing his independence and preparing for termination of service. It was recognized that for many clients counseling would not move beyond the first phase, that maintaining employment would be tenuous and perhaps not possible."

In the early stages of the program it became apparent that a personal contact with every client at two week intervals (as recommended in the initial procedure) was not necessarily in the best interests of all clients. It was agreed that a more individualized procedure would best serve varied client needs and counselors were therefore permitted to work out the most suitable arrangement with each client and to terminate counseling when it seemed most appropriate. However, all cases were kept open for the entire period of the project and a six month follow-up schedule was maintained for every client, including those no longer being seen on a regular basis.. This procedure alerted counselors to problems which might be developing and gave clients the assurance that they could call on the counselor if it became necessary.

CHAPTER III

RESULTS: I

QUANTITATIVE RELATIONSHIPS

SOURCE OF DATA

The influence of the experimental treatment upon vocational outcome was analyzed in the following manner. In addition to the chief independent variable (variable #1: treatment vs. no treatment), and the block of dependent variables (variables #26-31: see below), measures were obtained on approximately 30 additional variables which described the subjects of the study. Measures were obtained for the 307 experimental subjects and the 216 controls on each of the 40 variables and a 40 x 40 matrix of intercorrelations was generated. This matrix of first-order correlations was then inspected for variables (or groups of variables) which appeared to merit further examination. The technique employed for studying the matrix of correlations for significant relationships was a sequential series of multiple regression analyses, following the computational procedure worked out by Cohen (1968, in press). The 40 variables, and the measurement assigned to each, are presented in Table A of Appendix I.

Since some of the variables showed quite high first-order correlations with other related variables, it was possible to reduce the input for the multiple regression analyses, thus improving the power of the resulting statistical tests. The following sets of variables were isolated for study.

Set A: Demographic Variables (7 variables)

Originally, measures were obtained on 10 variables, which described such characteristics as sex, age, education, previous employment, etc. (see Table A, Appendix I). Examination of the first-order correlations showed substantial relationships among variables #3, #6, #7, and #8, all of which appeared to reflect the subject's chronological age. Accordingly, variables #6, #7, and #8 were excluded from further analyses. The variables, then, which make up Set A are as follows:

#2: sex
#3: age
#4: marital status
#5: years of education
#9: in or out of labor force (at workshop entry)
#10: months currently unemployed (at workshop entry)
#11: number of jobs held (for two years prior to workshop entry)

Set B: Disability Group (4 variables)

#14: emotionally disturbed, mild
#15: emotionally disturbed, severe
#16: physically disabled
Ref: mentally retarded[1]

Set C: Agency of Origin (10 variables)

#32: Boston
#33: Chicago
#34: Detroit
#35: Kansas City
#36: Los Angeles
#37: New York
#38: Newark
#39: Philadelphia
#40: St. Louis
Ref: Milwaukee[1]

Set D: Estimates at Intake into Workshop (5 variables)

#18: Client's State of General Health
#19: " General Social Adjustment
#20: " Motivation for Work
#21: " Realism of Vocational Aspirations
#22: " Placeability

Set E: Employment during Interval Between Workshop and Counseling (2 variables)

#12: Employed or Not Employed during interval
#13: Employed or Not Employed at start of counseling

Criterion Variables (3 variables)

The outcome criteria of the study were as follows:

#24: Placed/Not Placed during first six months of follow-up
#25: " " " " second " " " "
#26: " " " " entire twelve months
#27: Percent of time worked during first six months of follow-up
#28: " " " " " second " " " "
#29: " " " " " entire twelve months
#30: In Employment at end of first six months
#31: " " " " " second " "

Since the follow-up data at the end of six months was substantially the same as the 12 month data, it was decided to use only variables #26, #29, and #31 as the criterion variables for the study. These three variables comprise the dependent variables for all multiple regression analyses.

---

[1] In the scoring system utilized, within a group of related variables, one is designated as the "reference" variable and is given an arbitrary zero score.

THE ANALYTIC PROCEDURE

The relation of the independent variables to the dependent (criterion) variables was examined in the following manner. A series of multiple regression analyses was performed, relating the independent variables to the three dependent variables, first by studying all of the independent variables in combination (including the chief experimental variable: #1), then by studying the independent influence on the criteria of various sets, both singly and in combination. The computer outputs provided information also on the significance levels of relevant regression coefficients and their accompanying partial correlations. The computer data, therefore, enabled us to determine which variables (singly, and in combination) significantly influenced variation in vocational outcome.

These analytical procedures were first carried out on the entire study sample: experimentals and controls. The same procedures were then applied to the experimental subjects only. The latter analysis was designed to cast light on the question as to who succeeds and who fails.

THE EFFECTS OF THE CONTINUED COUNSELING SERVICE

The primary data of the investigation bear upon the vocational effects of a continued counseling service offered to 307 handicapped clients who had undergone training in a rehabilitation workshop and who were offered intensive counseling for at least one year subsequent to the completion of workshop service. The experimental Ss were chosen for the continued counseling service according to an odd-even selection procedure from a larger group of workshop graduates, the remainder of the group serving as controls. At the conclusion of continued counseling service to an experimental S, he and his paired control were followed up for a 12 month period to gain data on their respective vocational behavior. According to the data available for study, the control group is somewhat smaller than the experimental group (there were 307 Es and 216 Cs), since a number of paired controls had to be dropped because they had voluntarily engaged themselves in some sort of counseling service, and because controls were somewhat more vulnerable to attrition during follow-up.

In the analyses to follow, we shall first study the chief experimental effect, and then examine the influence of a number of moderating variables. Before we do so, however, it is desirable to present the output of the series of multiple regression analyses which enabled us to determine the combined and unique contributions of the many variables incorporated in the research design.

Table 1 shows the results of various regression runs, studying the effects of combinations of sets of variables on the three criterion variables of the study. It can be seen that all of the independent variables, taken together, account for approximately 30% of the variance (R^2) in the proportion of those clients who found employment during the 12 month follow-up (#26), about one third of the variance in percent of time worked (#31) and a little less than one fifth of the variance in "employed at time of follow-up" (#31). Variation across subjects on the demographic variables (Set A) and type of disability (Set B), or the combination of these two sets, accounts for little of the variation in vocational outcome. By far the best predictor of vocational outcome is the employment record of S, between leaving the workshop and

TABLE 1

MULTIPLE CORRELATIONS (R) BETWEEN COMBINATIONS OF PREDICTOR VARIABLES AND SELECTED OUTCOME VARIABLES (N = 523)

		Outcome Variables		
	Regression Runs[1]	#26[2]	#29	#31
(1)	$R_{A.B.C.D.E.\#1}$	.541***	.588***	.421***
(2)	$R_{A.B.E.\#1}$	.479***	.527***	.345***
(3)	$R_{A.B.D.}$	.357***	.381***	.334***
(4)	$R_{D.E.\#1}$	.487***	.548***	.348***
(5)	$R_{A.B.}$	.238	.192	.205
(6)	$R_{C.\#1}$	.317***	.309***	.237**
(7)	$R_{C.G.\#1}$	.360***	.359***	.296***
(8)	$R_{A.}$	.199	.158	.181
(9)	$R_{B.}$	.166	.131	.164
(10)	$R_{C.}$	.264**	.276***	.203*
(11)	$R_{D.}$	.304***	.342***	.266***
(12)	$R_{E.}$	.403***	.485***	.249***

[1] Subscripts describe the variables combined for each analysis; see descriptions, pp. 18-19, above.

[2] The criterion variables are defined above on p. 19.

*P < .10, two-tailed test.

**P < .05, " " "

***P < .01, " " "

entry into the continued counseling process (Set [illegible]). [illegible] a significant relationship between certain ratings made of S when he first entered workshop service (Set D), and vocational outcome. Another point worth noting in Table 1 is that there were significant differences in vocational outcome according to agency source. It remains to tease out the unique contribution of the experimental treatment (variable #1) and to work out how this relationship was influenced by other significant variables.

(1) The Experimental Treatment

Table 2 shows first-order and partial correlations between the experimental treatment variables (#1) and the vocational outcome measures. The partial correlations in Table 2 were read from the computer output of Line 1 of Table 1, in which all of the variables of interest were related to the criterion variables. They thus represent an estimate of the unique effects of the experimental condition, with all other variables partialled out. It will be seen that these partial correlations are of moderate size and are statistically significant. What is meant here is that Ss who received continued counseling service, as compared to their paired controls, worked a larger percentage of the elapsed time, were placed in employment in relatively larger numbers, and a larger proportion were found in employment at the end of the follow-up period of 12 months (see Appendix I, Table B and Tables L, M, and N). According to the customary statistical tests, we can be confident (at well beyond the 1% level) that these differences could not have been obtained by chance.

TABLE 2

FIRST ORDER AND PARTIAL CORRELATIONS BETWEEN EXPERIMENTAL
TREATMENT (VARIABLE 1) AND OUTCOME CRITERIA
(N = 523: 307Es PLUS 216 Cs)

Outcome Variables#	First Order Correlation	Partial Correlation	T-test of Regression Coefficient
26	.174	.204	4.63***
29	.142	.182	4.11***
31	.123	.152	3.43***

***Significant at less than P = .01.

#Variable 26 measures proportion placed in employment during 12 months of follow-up time;

Variable 31 measures percent of time worked as proportion of time available for employment, during 12 months of follow-up time;

Variable 31 measures proportion in employment at end of follow-up period.

(2) Early Employment

An important finding of the study is that job placement immediately on leaving the workshop (Set E) is a powerful determiner of vocational outcome. This effect holds for both experimentals and controls, although somewhat more strongly for the former. Although both the variables in Set E are significantly related to outcome, variable #13 is persistently stronger than variable #12.

(3) Ratings

Examination of the computer output involving relations between Set D and the outcome criteria shows that only two of the five judgmental variables included show significant partial correlations with vocational outcome. These were Nos. 18 and 20: an estimate of the general health displayed by client and an estimate of his motivation for work. Generally, clients whose general health was seen as "adequate," or who were perceived as "strongly" motivated for work, do better than their less healthy or less motivated counterparts. On the other hand, estimates of the client's social adjustment (#19), or of the reality of his vocational aspirations (#21), were not efficient predictors of vocational outcome. Variable #22 (estimate of ease of client's placeability in employment) occasionally had a significant relation to actual employment during the follow-up period, although not as frequently as might have been expected.

(4) Difference According to Agency

The 10 vocational agencies involved in the study differed somewhat, both in the relative proportions of experimentals who achieved positive scores in vocational outcome, and also in differences between their respective experimental and control groups. In considerable part, these differences can be traced to differing client compositions. Some agencies had larger proportions of older clients, who generally performed more poorly. Other agencies tend to specialize in serving the emotionally disturbed, who tended to have poorer employment records than the mentally retarded. An additional uncontrolled source of variation is that some agencies apparently were in a position to provide more intensive placement services for their control clients than was the case in some of their sister agencies. In any event, the effect of source of agency on vocational outcome is not very great, although it occasionally supplies a significant portion of outcome variance. Data presented by agency of source are found in Appendix Tables C through N.

(5) The Demographic Variables

Despite the fact that the set of 7 demographic variables, as a group, had no particular relation to vocational outcome, one of these variables (age: #3) was a significant factor in outcome. Generally, the older the client, the less favorable the vocational outcome. This relationship holds in both experimentals and controls. This factor provides one of the chief reasons for the significant Rs between Agency (Set C) and the outcome criteria. An important negative finding is that there were generally no significant relations between previous employment experience and vocational outcome, once the age of the client is partialled out. This means that a client's employment history is

TABLE 6

PERFORMANCE ON OUTCOME CRITERIA, BY GROUP (EXPERIMENTAL VS. CONTROL), AND BY AGENCY OF SOURCE; 12 MONTH FOLLOW-UP

		Outcome Variables					
Source	N	Worked At All		% Worked 50% or More of Available Time		% Working at End of Period	
		N	%	N	%	N	%
Agency 1							
Es	23	18	78	17	74	16	70
Cs	13	6	46	5	39	5	38
Agency 2							
Es	41	37	90	30	73	28	68
Cs	30	24	80	19	64	18	60
Agency 3							
Es	19	18	95	14	74	13	68
Cs	14	12	86	9	65	9	64
Agency 4							
Es	19	18	95	16	84	14	74
Cs	13	9	69	6	46	6	46
Agency 5							
Es	30	26	87	21	70	21	70
Cs	27	19	70	13	48	11	41
Agency 6							
Es	39	38	97	32	82	25	64
Cs	21	21	100	20	95	20	95
Agency 7							
Es	34	25	74	23	68	18	53
Cs	25	13	52	11	44	7	28
Agency 8							
Es	28	24	86	22	78	19	68
Cs	15	9	60	9	60	8	53
Agency 9							
Es	42	36	86	32	75	32	76
Cs	38	35	92	31	82	26	68
Agency 10							
Es	32	28	88	19	60	19	59
Cs	20	11	55	7	35	8	40
Totals							
Es	307	268	87.3	226	73.6	205	66.8
Cs	216	159	73.6	130	60.1	118	54.6

not an efficient predictor of his ability to profit from rehabilitation services, at least for the kind of population under study. This finding lends support to similar findings reported by others.

(6) Type of Disability

Compared to other variables studied, the coarse disability grouping used in the study accounts for very little of the variation in vocational outcome. Generally, however, a significantly larger number of mentally retarded clients were placed in employment during the 12 month follow-up period than was the case for clients classified as physically disabled, and almost twice as many mentally retarded clients were working at the close of follow-up than was true for clients who were originally classed as having severe emotional disturbances. Differences between disability groups in proportion of time-worked were meager, but again the physically disabled show a significantly lower proportion of time-worked than do the mentally retarded. If we remember, however, that age and general health show significant negative correlations with the criteria, we have some accounting for these differences. The mentally retarded members of the sample tended to be younger and were generally judged to be healthier than the clients in the other disability groupings, especially those classed as physically disabled.

FACTORS WHICH INFLUENCE SUCCESS AND FAILURE

Table 3 shows the results of a series of regression runs on the experimental subjects only, relating the various predictor variables to the outcome criteria, excepting of course the experimental treatment variables (#1). What we are interested in here is the kind of client who appears to show more (or less) benefit from the effects of continued counseling. Most of the relationships found in the entire sample hold also when we examine only the experimental subjects, except that the differences among agencies now become insignificant. From examination of the individual predictor variables that appear to make for differences in vocational outcome, we can reconstruct the following pictures.

Generally, a slightly larger proportion of men were placed in employment than were female clients and, as before, if a client finds employment immediately after leaving the workshop, he is likely to be employed during the follow-up period. As before, clients who were judged to have better general health and stronger motivation for employment, had better future placement records. Age does not turn up as a significant variable within the experimental group, which suggests that older clients showed considerable benefits from counseling, since they apparently did relatively better than the older control clients. Again, physically disabled clients had significantly poorer placement records than the mentally retarded, with the more severely emotionally disturbed clients next in difficulty and the more mildly emotionally disturbed clients doing about as well as the mentally retarded.

Much the same relationships prevail in relation to percent of time worked, except that age of client is added to the above findings as a significant negative result, i.e., older clients maintain employment for significantly less time during the follow-up period than do younger clients.

TABLE 3

MULTIPLE CORRELATIONS (R) BETWEEN PREDICTOR VARIABLES AND SELECTED OUTCOME VARIABLE, FOR EXPERIMENTAL CLIENTS ONLY (N = 307)

		Outcome Variables[1]		
	Regression Runs[1]	#26	#29	#31
(1)	$R_{A.B.C.D.E.}$	.474***	.569***	.432***
(2)	$R_{A.B.D.E.}$	.445***	.523***	.389***
(3)	$R_{A.B.E.}$	.389***	.482***	.296***
(4)	$R_{A.B.}$	.224	.192	.238
(5)	$R_{A.E.}$	.375***	.478***	.282**
(6)	$R_{B.E.}$	.364***	.452***	.223*
(7)	$R_{D.E.}$	.420***	.495***	.302**
(8)	$R_{A.}$	.190	.185	.226
(9)	$R_{B.}$	.147	.069	.138
(10)	$R_{C.}$	.210	.189	.143
(11)	$R_{D.}$	.336**	.339**	.285**
(12)	$R_{E.}$	.336***	.445***	.164

[1] See Table 1 for explanation of symbols.

Very few predictors differentiate between clients who were found in employment at the end of the follow-up period and those who were not in employment.[1] The only significant predictors were the rating on work motivation (variable #20) and disability grouping (Set B), with fewer of the emotionally disturbed clients, both mild and severe, in employment at the end of the follow-up period than was true for the mentally retarded; the physically disabled fell between these proportions.

---

[1] One of the measures taken on experimentals only at the start of the project and then repeated at its end was the employability rating scale devised by the Chicago JVS. Comparison of test-retest data on this scale showed no significant changes from the beginning to the end of the counseling period. For this reason these data will not be analyzed in the present report.

OVER-ALL REHABILITATION OUTCOMES

The preceding results must be understood within the framework of a generally high level of rehabilitation outcome throughout the entire sample. Some 87% of experimentals and 74% of controls were in employment for at least some part of the 12 month follow-up period. Similarly, experimentals worked some 68% of the available labor-time during follow-up, and controls maintained employment for about 59% of the available time. Finally, about 67% of experimentals and 57% of controls were found in employment at the end of the 12 month period of follow-up. The point to be stressed here is that the entire process of vocational rehabilitation (of which the continued counseling service was only the final phase) appears to be quite successful for most of the handicapped clients under study, with the final phase adding a moderate, but highly significant, increment. The relatively high levels of vocational outcome among the control clients was somewhat unexpected, permitting somewhat less room for the chief experimental variable of the study (continued counseling) to make an appreciable difference between experimentals and controls. While the relatively high levels of vocational outcome in the entire sample should be gratifying to the rehabilitation agencies involved in the study--and to the state agencies who are referring clients to them--a better test of the effects of continued counseling would have been to apply it only to those clients who failed to find any employment after their period of workshop service.

Another point to keep in mind is that the sample was quite heterogeneous. Men outnumbered women (males: 61%; females: 39%), with the former performing somewhat better on certain of the outcome criteria than did the latter. The sample averaged approximately 35 years in age, with two thirds falling between 20 and 50. They had achieved about 9 years of formal education, with the central two thirds ranging from about the 5th through the 12th grade. Less than three quarters were described as being "in the labor force" at the time of their referral to the service agencies, and the average amount of current unemployment of the entire sample was between 12 and 15 months. Experimentals did not differ significantly from controls on any of these demographic variables (see data in Appendix I, Table B).

Another major source of heterogeneity was type of disability. Table 4 shows that the four disability groups varied somewhat in subsample size and also in the relative proportions which were experimental and control subjects. Also, although disability, per se, accounts for little of the total criterion variance (as may be seen in Tables 1 and 3 above), Table 5 shows that this is because the four disability subgroups appear to behave quite differently. The disability subgroup which appears to benefit most from the counseling process is composed of the severely emotionally disturbed. On the other hand, the clients with the more mild emotional disturbances, if anything, show a negative effect, i.e., the controls tend to do slightly better than the experimentals. The physically disabled and mentally retarded clients show a somewhat less strong, but positive, effect of the counseling process than do the severely emotionally disturbed, but the results move in the same direction.

TABLE 4

SUB-SAMPLE SIZES: NUMBERS OF CASES IN DISABILITY GROUPS, BY EXPERIMENTALS AND CONTROLS

Disability	Experimentals		Controls		Totals	
	Number	(%)	Number	(%)	Number	
Emotionally Disturbed, Mild	60	(63.5)	35	(36.5)	95	(
" " , Severe	105	(61.0)	67	(39.0)	172	(
Physically Disabled	83	(56.1)	65	(43.9)	148	(
Mentally Retarded	59	(54.6)	49	(45.4)	108	(
Totals	307	(56.8)	216	(43.2)	523	(1

TABLE 5

VOCATIONAL OUTCOMES BY DISABILITY GROUP, COMPARING EXPERIMENTALS (N = 307) AND CONTROLS (N = 216)

Disability	Outcome Variables					
	#26		#29		#31	
	Es%	Cs%	Es%	Cs%	Es%	
Emotionally Disturbed, Mild	91.6	88.6	66.7	80.0	1.7	6
" " , Severe	88.6	64.2	61.0	43.3	2.9	1
Physically Disabled	79.5	67.7	65.5	49.2	6.3	4
Mentally Retarded	91.5	81.6	71.3	42.8	79.7	4

In summary, the client who showed the greatest positive benefits f the continued counseling process was more often younger rather than older more frequently a man than a woman, was severely rather than mildly emoti ally disturbed, tended to have better general health and was initially ju to have stronger motivation for employment. The successful client was al more likely to have enjoyed an early job placement and was working at the he was picked up for continued counseling; this finding held for both exp mentals and controls.

CHAPTER IV

RESULTS: II

QUALITATIVE ASPECTS OF THE COUNSELING PROCESS

During the first year of the project it was decided to engage in some systematic analysis of the nature of the client's problems and how these were handled by the counselors. Regular monthly and semi-annual reports provided data as to the number of contacts with clients, employers, family members, other social agencies, employment data, etc., but these were statistical in nature and therefore could not adequately reflect what was taking place between the client and the counselor.

How to conduct this study presented some difficulties. Keeping full case records on every client would have diverted too much counselor time from giving needed service to clients, and also posed a formidable problem of analysis.

A form was finally devised which counselors were asked to fill out after every interview with each client accepted for service beginning 4/1/66. Although this was a year after the project had begun, intake was still open and it was felt that there would be sufficient cases for this study. The form known as Brief Recording Form for Counseling Contact - Form G (see Appendix II) was to be filled out by checking pertinent items, adding brief comments, and provided a running record of the problems raised by the client, including his own efforts to meet these problems and the actions taken by the counselor. In addition each agency was asked to prepare case protocols on 2 to 3 clients, so that depth studies could be made of what had transpired during workshop and the follow-up period. By analyzing the case protocols and the Brief Recording Form, we expected to secure data that would illustrate the counseling process and that would provide clues as to what types of problems were encountered by the client. We wanted to know what interfered with his job adjustment, and when intervention was most needed.

PROCEDURE

Although it had originally been thought that the records could be studied, by relating the client problems to client activity and counselor intervention, on a time-continuum basis, this turned out to be unfeasible. The procedure adopted was to analyze cases within each disability group so as to determine whether there were any discernible patterns of problems and actions taken.

Data follow on the composition of the total group and by way of an analysis of the items on the Brief Counseling Contact form.

THE SAMPLE

The sample consisted of 116 clients who were accepted for service beginning with April 1, 1966. These fell into the following disability groups:

Mentally Retarded	28
Emotionally Disturbed, Mild[1]	17
Emotionally Disturbed, Severe[2]	50
Physically Disabled	11
Disabled Aged	10

TABLE 1

BREAKDOWN BY AGE, SEX, DISABILITY AND MARITAL STATUS

	Male			Female		
	Married	Single	Other	Married	Single	Other
MENTALLY RETARDED						
17 - 19		10			9	
20 - 24		13			1	
25 - 34		3			1	
35 - 44						
45 - 54	1					
Total 28	1	16			11	
EMOTIONALLY DISTURBED, MILD						
17 - 19		3				
20 - 24		3			1	
25 - 34		3			2	1
35 - 44	1		1			1
45 - 54					1	
Total 17	1	9	1		4	2

---

[1] Includes those with moderate neuroses and character disorders.

[2] Includes those with psychoses and severe neuroses.

	Married	Single	Other	Married	Single	Other
EMOTIONALLY DISTURBED, SEVERE						
17 - 19		1			1	
20 - 24		5			6	
25 - 34	1	3			5	3
35 - 44	5	6	2	1	2	1
45 - 54		1			1	6
Total 50	6	16	2	1	15	10
PHYSICALLY DISABLED						
17 - 19		1				
20 - 24						
25 - 34		3				
35 - 44	1					
45 - 54	1		2		2	1
Total 11	2	4	2		2	1
DISABLED AGED						
55 - 64	4		1		1	1
65 plus						3
Total 10	4		1		1	4

CHARACTERISTICS OF THE TOTAL SAMPLE

These subjects tend to be young and unmarried, with little work experience. Only 21 clients are over 50 years of age. The latter are almost equally divided between the Emotionally Disturbed and the Physically Disabled clients. Approximately three fourths of the entire sample were emotionally disturbed (both EDM and EDS).

Sixty clients (52%) were employed at the time of acceptance into the program, most of the placements having been made by the JVS agencies.

ANALYSIS OF ITEMS ON THE BRIEF RECORDING FORM FOR COUNSELING CONTACT (Form G)

Tables 2 through 5 (pp. 33, 35) are a tabulation of the items recorded by counselors after each interview with their clients. It should be noted that there is not a one to one relationship between the number of tallies and the number of clients. However, the figures do serve as an overview of the kinds of problems which clients in the sample faced, their efforts on their own behalf and the actions taken by counselors.

Problems Raised by Client (Table 2)

There were a total of 1,734 problems raised by clients, of which 488 dealt with the problem of finding a job. Although this request was frequently made by clients who were already working, but who were having initial difficulties in adjusting, the greater number of requests came from those who were unemployed and looked to the counselor for help.

The number of problems around maintaining employment totaled 437, of which the major difficulties were in keeping up with work requirements (191), a feeling that the job was too hard (93) and of being underpaid (76). Feelings of being discriminated against (53) came mainly from the severely emotionally disturbed. Getting to work on time seemed a minor problem for all groups with only 24 tallies.

Problems around inter-personal relationships totaled 174, trouble with supervisors accounting for 97 and with co-workers 77. It was noted that these problems were frequently associated with feelings of insecurity and lack of social "know-how," particularly for the mentally retarded and the younger emotionally disturbed clients.

Problems in Other Life Areas (Table 3). Because of the variety and high number of concerns under this heading (418), the items were broken down under specific problem areas. Health (94) was an area of concern for all groups except the mentally retarded and emotional stability (66) was of greatest concern to the severely emotionally disturbed and the disabled aged. The three items concerning family relationships and problems totaling 160, were particularly high for the severely emotionally disturbed and high for the mentally retarded and disabled aged under general family problems. Concern over financial problems (25) and living arrangements (22) were of concern mainly to the severely emotionally disturbed clients.

Problems in Vocational Areas. Fears regarding employment (107) included fears expressed about going out on interviews, about maintaining employment, and apprehension about future employment and was voiced mainly by the mentally retarded and both emotionally disturbed groups. A fairly high number of the disabled aged also expressed fears about maintaining employment. Interest in further education and training was relatively small (25) and was brought up mainly by the younger clients in both emotionally disturbed groups and the physically disabled.

How Client Tries to Meet Problems (Table 4)

The total number of client actions was 2,244. The three items which indicate client actions through "talking out" totaled 295, and were highest

TABLE 2

PROBLEMS RAISED BY CLIENT

	Total	Mentally Retarded (28)	Emotionally Disturbed, Mild (17)	Emotionally Disturbed, Severe (50)	Physically Disabled (11)	Disabled Aged (10)
1. Asked help in finding job	488	51	72	321	25	19
2. Difficulty keeping up with work requirements	191	23	31	117	13	7
3. Having trouble with supervisor	97	26	6	54	10	1
4. Having trouble with co-workers	77	15	11	48	2	1
5. Feels is underpaid	76	8	11	50	4	3
6. Feels job too hard	93	26	15	49	1	2
7. Trouble getting to work on time	24	3	3	18	0	0
8. Feels is discriminated against	53	9	4	38	2	0
9. Brings up problems in other life areas	550	56	93	333	33	35
10. Other problems	85	2	25	32	17	9
Total	1,734					

TABLE 3

BRINGS UP PROBLEMS IN OTHER LIFE AREAS

	Total	Mentally Retarded (28)	Emotionally Disturbed, Mild (17)	Emotionally Disturbed, Severe (50)	Physically Disabled (11)	Disabled Aged (10)
1. Health	94	7	19	44	13	11
2. Social life and recreation	48	10	11	24	3	0
3. Emotional stability	66	1	6	51	1	7
4. Parental conflict	25	2	5	18	0	0
5. Marital problems	42	0	6	36	0	0
6. Family problems	93	10	14	64	0	5
7. Financial	25	0	1	22	1	1
8. Living arrangements	22	1	1	13	3	4
Total	415					
BRINGS UP PROBLEMS IN VOCATIONAL AREAS						
1. Education and training	25	3	8	8	6	0
2. Fears re-employment	107	22	22	53	3	7
Total	132					

for the severely emotionally disturbed. In part the items "talks to supervisor" and "talks to co-workers" reflects the effects of counselor intervention in encouraging clients to discuss their problems. Seeking employment (168) and seeking other professional help (352) which included casework, psychiatric and medical treatment, the Employment Service and DVR, also was in part a response to the counselors' efforts to involve clients in helping themselves through available community resources. The three items "does nothing," "sits home," "avoids people" totaled 397 and indicates client inability to take any action on his own behalf. It was noted that as some clients became more adjusted they began to take more action on their own behalf. There were relatively few job quits (44) for all disability groups which seemed directly related to counselor intervention. Only a small proportion of clients (47), mainly the severely emotionally disturbed, actively sought more training.

By far the highest activity for all client groups was in seeking counselor aid. This totaled 913. It was noted, however, that except for a small proportion of clients who remained dependent on the counselor throughout the entire period of follow-up that requests for contacts with the counselor tended to decrease as job and related problems were worked out.

Counselor Actions (Table 5)

Actions taken by the counselor totaled 1,669. A high proportion of counselor activity was in regard to job referrals (259) and contacts with employers by telephone and visits (184). This tally does not include preplacement activity around job development, or visits in which the counselor accompanied clients for interviews. The 23 referrals for training were low for two reasons. Some clients had previously received training and few of the others were ready or able to move into a training program. The 84 referrals to other agencies included only new referrals. From a review of the records it is apparent that many clients, particularly the severely emotionally disturbed, were already receiving psychiatric or casework service prior to acceptance for follow-up counseling. Contacts with families numbered 122, were concentrated mainly on the mentally retarded and both emotionally disturbed groups.

The highest tally, 687, was in the counseling area. An analysis of this item indicates that a high proportion of the interviews were concerned with discussion of the problems raised by the client, encouraging and supporting job seeking and staying with a job, working out immediate job problems, allaying anxiety around job problems, encouraging clients' seeking or continuing with casework and psychotherapy. Role playing as preparation for job interviews was high for younger clients in all groups. Discussion of training and educational programs was high for the younger emotionally disturbed clients.

Helped Client in Other Ways which totaled 310 refers to concrete services performed by the counselor for clients. An analysis of the records shows a concentration on giving information regarding other resources, such as unemployment compensation, social security and disability benefits, insurance plans calling other agencies and hospitals; filing out forms; accompanying clients to interviews and making home visits. The severely emotionally disturbed required more concrete intervention than any other group.

TABLE 4

HOW CLIENT TRIES TO MEET PROBLEMS

	Total	Mentally Retarded (28)	Emotionally Disturbed, Mild (17)	Emotionally Disturbed, Severe (50)	Physically Disabled (11)	Disabled Aged (10)
1. Talks to supervisor	169	19	14	117	16	3
2. Talks to co-workers	73	8	4	51	8	2
3. Tells people off	53	9	9	33	1	1
4. Avoids people	126	5	22	91	2	6
5. Does nothing	160	23	27	101	6	3
6. Quits job	44	5	11	23	2	3
7. Actively seeking employment	168	16	31	92	18	11
8. Just sits home	111	9	21	62	14	5
9. Trying to get help from other social or professional sources	315	26	51	201	29	8
10. Trying to get more training	47	1	7	35	3	1
11. Seeks counselor	913	83	186	541	64	39
12. Other	65	5	3	39	10	8
Total	2,244					

TABLE 5

MAJOR PROBLEMS DEALT WITH OR ACTIONS TAKEN BY COUNSELOR

	Total	Mentally Retarded (28)	Emotionally Disturbed, Mild (17)	Emotionally Disturbed, Severe (50)	Physically Disabled (11)	Disabled Aged (10)
1. Made job referral	259	29	40	158	19	13
2. Called current employer re job problems	145	31	21	75	14	4
3. Visited client on job to help in job problems	39	8	6	19	3	3
4. Arranged for training program	23	2	8	8	2	3
5. Made referral to other services	84	16	15	37	8	8
6. Contacted family member(s)	122	37	17	61	2	5
7. Counseled on problems raised by client	687	83	120	389	45	50
8. Helped client in other ways	310	44	32	183	28	23
Total	1,669					

THE MENTALLY RETARDED

Employment Data

Of the 27 clients in this sample only 5 were over 25 years of age and only 1 client was married. Twelve had never worked before referral and 13 had worked for less than a year. At the time of acceptance in the follow-up counseling program, 10 clients were working and, at termination, 22 were employed, 13 of whom remained on the same job throughout the entire period. There were 2 clients who did not work at all and 1 client who worked intermittently about 3 months during an 18 month period. Of those who were not employed at termination, none was in the labor market: 1 was in jail, 1 was hospitalized for a physical illness, 1 was institutionalized, 1 was pregnant and 1 was returned to the workshop for further training.

Analysis of Counseling Contacts

Since more than half of the group was unemployed at the time of acceptance, the major problem was finding a job, and then working out problems of adjustment in work performance and relationships with supervisors and co-workers. Most clients did little on their own behalf in the area of job seeking. For the majority, counselor activity was intensive and generally occurred within the first 6 months. For a smaller group, contacts continued throughout. The initial activity concentrated chiefly on the referral which consisted of preparation of the client for employment, thorough briefing on how to dress, how to fill out applications, and how to talk with the employer. Role-playing was a major technique in working with this group. Some clients were accompanied to interviews and visits, and telephone calls were made to the employer after the initial placement. Follow-up activity shortly after placement concentrated on the problems encountered by clients in regard to job requirements. For many, the problem seemed directly related to clients' fearfulness about not being able to handle the job, not understanding instructions, lacking know-how about how to approach employers or relate to co-workers. Counselor activity centered on helping the client handle these problems, working with the employer in making adjustments, and visiting the job site when this seemed necessary.

Another problem following the initial placement period was the desire of some clients for a better job, and more money, so that counselors were involved in helping them understand the need for waiting until an appropriate time. There were relatively few quits, and this seems to have been related to the counselors' activity in encouraging clients to give themselves a chance on a job. There were, however, some clients who had to go through several job changes before finally adjusting. An example was R.N., an 18 year old, without any previous work experience, who was placed quickly, left, was replaced and, after another job change, finally accepted and remained with a job which he has held for the past year.

A situation where follow-up was needed was that of A.T., a 25 year old, withdrawn, non-verbal girl, with no work background, with whom counselor maintained contact through the active cooperation of the mother until such time as the client's resistance to the agency was overcome. Although the client expressed constant dissatisfaction with the type of work she was performing, she was helped to stay on the job and to talk through her dissatisfactions with her supervisor, so that minor changes could be made. She has remained on the same job throughout the program, performs satisfactorily and has learned to work cooperatively with co-workers and supervisor.

For the majority in this sample, difficulties were resolved within the first 2 or 3 months and some clients requested that counseling be terminated. Others continued seeing the counselor for general support or returned at a later time to discuss a problem which arose. The availability of the counselor made it possible to work through a difficulty which the client might not have been able to handle on his own. J.S., who was placed almost immediately, was seen several times and found to be working out quite well. Six months later he again reported no problem, was doing well and was happy with his job. However, two months later he asked for counselor's help in handling a problem with his co-workers. The counselor called the employer, visited the client on the job, and saw him several times to help him deal with the teasing of his co-workers.

The close contact developed with the employer before placement, and maintained after the client began to work, was an important factor in ensuring job success for some clients. D.F., a 19 year old girl with no previous work experience, illustrates this point. Although highly motivated and liked by the employer, she had little skill, was slow, and most likely could not have maintained the job without the help of the counselor, who worked closely with her and with the employer for the first few months of the placement.

An analysis of OTHER LIFE PROBLEMS indicates that the major areas of concern for these clients were around fears of going out on interviews, of not being able to handle a job, family problems, and lack of social outlets. Family problems were in regard to pressure from families to work, feelings that parents were overprotective, or problems affecting the home situation, i.e., parents' pending divorce. The problem of social outlets was rarely brought up after the initial placement and may have been solved for some clients once they became employed. Also, one of the agencies from which a large proportion of the sample came, has an Employment Club and many of the clients attended meetings which afforded them an opportunity to meet regularly and to get to know each other.

In reviewing the entire sample of those who are employed, all but one seem to have made a stable adjustment. This client has had 6 jobs in 12 months and may not be able to sustain the one which he was holding at the close of the program.

THE EMOTIONALLY DISTURBED, MILD

Employment Data

The 17 clients in this group ranged in age from 17 to 52. Three quarters were under 35 years of age. Three clients had never worked, and 13 had worked less than 5 years. At the time of acceptance into the project, 4 clients were employed. At termination 12 were employed, including the 4 who were working from the beginning, 6 were placed within the first 2 months and 12 were working at the end of the program.

Of the 5 who were not employed at termination, 4 were placed shortly after the program began and worked for less than a month. Three of these clients returned to the workshop, 1 left the labor market. One client worked sporadically throughout the program and had a number of jobs, from which he was either fired or which he quit.

In the employed group, a little over half held the same job during the entire follow-up period. Only one client experienced difficulty in securing and holding employment and, because of illness, was not available for employment for a good part of the project.

Interviews ranged from 2 to 17, for those who were employed at the end. In this group, 5 clients adjusted quickly after the initial placement and required no further follow-up. Among these not employed at the end, the number of interviews ranged from 6 to 34. Those who were seen for a short period usually were self-terminated or were removed from the labor market by illness.

Analysis of Counseling Contacts

The bulk of requests in the employment area was for help in finding a job. This included requests from those clients who were working and wanted a change, as well as requests from those who were not working. A related problem was difficulty with work requirements, which, for some, reflected dissatisfaction with the type of work being performed or with production demands. The major area of difficulty, however, was in other life areas. As with the young mental retardate, there was concern about going out on job interviews, a lack of confidence about being able to succeed, but once placed there was a desire to move ahead and requests were made for training and vocational planning. Concern with family problems also was high. Miscellaneous requests dealt with such problems as filling out forms, applying for disability, unemployment compensation, etc. Two clients in this group were responsible for a majority of these problems.

Clients in this group were more active on their own behalf than the mentally retarded in seeking employment, getting professional help from the Employment Service, from DVR, psychiatric sources, other agencies, and were also active in seeking counselor aid.

Counselors were involved in job referrals and employer contacts, but the greatest activity was in counseling per se. Clients were given considerable support and encouragement in working out job problems and in vocational planning, were stimulated to look for jobs on their own and to seek employment and use other resources in the community. Role-playing was also used as techniques with clients who were fearful of applying for employment.

Other clients required considerable help in the beginning before they could reach the point of being able to go out on interviews and to become involved in the job seeking process. Such a case was E.V., a 21 year old with no previous employment history. He seemed to lack the energy to mobilize himself to seek employment, expressed fear of meeting an employer and took no steps on his own behalf. Counselor spent a number of interviews in role playing and stimulating him to try going on job referrals which had been arranged, and also encouraged the client to return for therapy. After 4 interviews, the client accepted a referral, but rejected the job. He finally accepted another referral, but worked only 4-1/2 days and quit. The counselor continued with job discussions and referrals, and also encouraged client to seek therapy. When E.V. finally accepted a job, he had many complaints about the difficulties of the work and again left after a few weeks. He did, however, continue to see counselor and his therapist. Repeated referrals were made which client did not accept, although he went out on interviews. At the end of 6 months he found a job on his own and, when the program terminated, had been working for 12 months.

In the case of G.L., a 48 year old woman with a long and stable history of employment until her breakdown, intensive counseling contacts--34 interviews over an 18 month period--were unsuccessful in breaking down her resistance to going to work. This seemed to stem from her initially unsuccessful job placements after leaving the workshop, and her fear that she would lose both her disability benefits and any other job which she tried.

With others, who were better motivated, there were problems of inappropriate behavior, lack of control, difficulties with supervisors and co-workers. Such a case was P.H., whose aggressive behavior may well have been a reaction to continued pressure from his mother for employment at a higher level than the client could perform. The counselor worked closely with P.H. for a year, and concentrating on trying to help client control his behavior, by channeling his energy into job performance, and helping him work through his problems of relationship to authority and with peers. Further job referrals were made as he either lost or gave up a job. There were several contacts with the mother and a referral to a family agency, since it was apparent that her interference with her son stemmed from her own problems. Although P.H. went through 4 jobs during the period of contact, he showed improvement in his job behavior and was able to stay with his last job for 6 months. He may well need continued counseling but seems to have made positive gains from his experience and the support he received during the follow-up.

This case illustrates the negative influence of a parent who exerts too much pressure or fails to give client the support which he needs during the period when his job adjustment is tenuous. In another situation, the parent was so overprotective and fearful of permitting the client to work that the agency had to take the position that further service could not be given unless the client accepted a job referral.

Another problem was to help the client stay with a job long enough to learn how to do it. After considerable activity in referring, role playing, and preparing M.K., he was placed, but immediately began agitating for a better job within the firm, since he felt that the work was too simple. When a change was finally effected, client felt that the tasks were too difficult, and had to be supported in making the effort to stay with this job which it was felt he could handle if he gave it enough time.

Although this is discussed more fully in the section under EMOTIONALLY DISABLED, SEVERE, and under OBSERVATIONS, the case of A.L., who was both emotionally disturbed and mentally retarded, illustrates the problems presented by a dependent person lacking the inner resources to deal with a multitude of personal and family problems. Despite intensive support over a 15-month period, at the termination of the program A.L. was referred for further personal counseling services because of his dependency and emotional instability.

EMOTIONALLY DISTURBED, SEVERE

Characteristics

The 50 clients in this group ranged in age from 17 to 54. One third were under 30, one third between 30 and 39 and one third over 40. There were 24 males and 26 females. Only 7 of the total group were married, 6 men and 1 woman. All of the clients had a record of hospitalizations, ranging from 1 to 11 times. Over half had more than one period of hospitalization. Thirty-seven were receiving psychiatric treatment during the program.

Employment Data

Six clients had never worked and 17 had less than 2 years of employment.

At the time of acceptance into the project, 35 of the clients had been placed in employment. At termination, 28 clients were employed. Of those employed at closing, 19 were working at time of acceptance, 6 became employed within the first follow-up period, 2 were in training and were placed immediately upon completion of program, 1 did not work until almost the end of the program. Of the 22 not employed at termination (44%), 16 had been employed at time of acceptance, but only 3 of this number are still in the labor market. Seventeen clients are no longer in the labor market for the following reasons: 6 were unable to accept employment, 7 were hospitalized for psychiatric reasons, 2 were hospitalized for physical reasons, 1 left town, 1 returned to workshop, and 2 refused contact--whereabouts unknown.

Clients in this group presented more problems and required more service than any other disability group. The number of interviews ranged from 2 to 46 with an average of 14 per client. Excluding the 9 clients who kept the same job throughout the program, and 4 who did not work at any time, there was considerable job change and there were fewer employed at the termination of the program than at the beginning, accounted for in part by hospitalizations and illness.

The three greatest problem areas were OTHER LIFE AREAS, finding a job and job requirements. A breakdown of OTHER LIFE PROBLEMS indicates much concern in regard to family problems, emotional stability, health and medication. There were fears in regard to employment, and somewhat less concern with social, financial and housing problems. A good deal of their own activity was directed to securing psychiatric help and casework, making contact with hospitals, use of the State Employment Service in seeking employment, and a great reliance on the counselor.

Counselor activity was heavy in job referrals, employer contacts, and agency contacts. Counseling was directed toward a discussion of problems, helping clients arrive at decisions, allaying anxiety and being supportive. There was also much activity in giving direct service, such as making calls to other agencies, giving information and locating resources for moving, legal advice, etc., making arrangements for medication, and assisting clients with miscellaneous requests.

Neither the number of hospitalizations, nor the length of hospitalization, seemed to be indicators of success in securing and holding employment. One client who was actively delusional and had been hospitalized for 10 years, worked throughout the entire program. Another client who had been hospitalized for 12 years made an excellent and quick work-adjustment within the first month. One of the quickest to adjust was a client who had been hospitalized 12 times.

From the standpoint of age, the number of clients over 30 in the employed and not-employed groups was the same, whereas twice as many clients in the under 30 group achieved stable employment. The average number of interviews for those over 30 was lower, and 5 clients in this group adjusted immediately after the initial placement, requiring no further follow-up, whereas all clients in the under 30 subgroup required intensive preparation and follow-up counseling.

There were 10 clients in the total sample who were seen from 23 to 62 times. In all of these cases, counseling continued on an intensive basis throughout the program. The common thread which seemed to characterize these clients was a deep dependency based on feelings of inadequacy and a fear of assuming responsibility. Four cases were complicated by family responsibility or family interference.

Since the problems varied considerably among all of these clients, as with the others in the caseload, cases are presented to illustrate some of the problems brought by the clients and how they were handled by counselors.

Among younger clients without previous work background, the initial placement brought many complaints about the work requirements, dissatisfaction about the type of work and often the inability to accept supervision. For T.S., age 21, there was the additional factor of parental pressure. He threatened to leave home, although he did nothing about this or about improving his work performance, and began to drink to excess. Counselor kept in touch with the employer about the job problems, visited the client on the job, communicated with the psychiatrist, and saw the client frequently to encourage his remaining on the job. Contact was also made with the family in an effort to help reduce tensions between client and his parents. T.S. was able to remain on the job for 6 months and, with counselor's help, moved to another job which he found more satisfying and also made an arrangement for independent living.

For many clients, there was also the problem of trying to seek advancement too quickly once the initial adjustment was made, and before the client was ready to assume more responsibility. However, for Z.T., a 39 year old, married man, who had been a successful businessman until he suffered a depressive break, job adjustment depended on his not being promoted too quickly by his employer, who recognized his excellent work potential. There was also a marital problem which had to be resolved, since it seemed certain that Z.T. could not maintain emotional stability if his wife went ahead with divorce plans. In addition to working directly with the client in encouraging him to continue working, counselor saw the employer frequently to make sure that he was not promoting Z.T. too quickly, spoke with the wife several times, and arranged for referral to a marriage counselor. With the reconciliation of the couple, Z.T.'s tension eased, and his progress on the job was maintained. At the end of 18 months, he seems ready to assume the responsibility of being production supervisor.

This case also illustrates one which was worked out successfully because of the cooperation of the employer and the positive outcome of the marital problem. With C.E., a 42 year old man whose marital situation could not be salvaged, there is a real possibility that he may not be able to continue with his job, which he has held for the past year, because of his growing depression since his wife divorced him. The adverse effect of unresolved family problems on emotional stability and job adjustment was also observed in the only two cases involving women with small children. In both situations, the women were lacking in confidence, had marital problems and the responsibility of caring for home and children. Both received intensive service throughout the program, but were unable to maintain employment.

P.N., a 44 year old woman, was seen 45 times within 8 months to help sustain her on a job. Her problems encompassed all aspects of job adjustment, and family problems: marital difficulties, the illness of her husband, fears that she could not adequately care for her children. She finally developed delusional ideas that she was being watched, eventually became suicidal, and had to be hospitalized. The counselor was intensively involved in giving the client support on her job since P.N. was highly motivated to work, in contacts with the psychiatrist, in working out problems between husband and wife, and in contacts with the hospital.

Almost the same pattern of inability to cope with a job and family responsibilities showed itself with I.M., a 33 year old divorcee with schoolage children. She was seen 62 times during an 18-month period to help her complete a training program and move into employment. Although she was placed several times and worked for short periods, I.M. showed little increase in confidence and in ability to manage her domestic affairs, or improvement in handling job referrals or job assignments. At the time the program was terminated, I.M. was unemployed, and requested further training because of her feeling that she could not adequately handle a job.

With some clients who required continuous and intensive follow-up throughout the program, progress was slow, but evident in small gains made over a period of time. B.J., age 22, had great difficulty in moving into employment. Although under much pressure from her parents to start working, she was so fearful that it took 10 contacts with counselor before she could go on a job referral. Counselor prepared her mainly through role-playing, and made a number of job referrals before client was hired. Problems developed immediately because of B.J.'s compulsive talking and inability to get along with coworkers. The counselor made a number of calls to the employer and saw B.J. frequently to discuss this problem. When this job terminated, there followed another period of preparation, making referrals and supporting her efforts to control her talkativeness on her next job. At the termination of the program, B.J. was working part time, showed considerable improvement in controlling her talkativeness and was motivated sufficiently to be seeking a full-time job.

PHYSICALLY DISABLED

Characteristics

The 11 clients in this group ranged in age from 19 to 54. All but 4 clients were over 40 years of age. Of the 6 clients with multiple disabilities, 5 had a neurological disorder with a secondary disability of emotional disturbance. There were only 2 married clients.

Employment Data

At the time of acceptance for continued counseling, 5 clients were employed, and they continued working until termination. Two other clients were placed within the first follow-up period, making a total of 7 employed at termination. Of the 4 not employed at termination, 1 worked for 5 months until he was hospitalized, the other 3 did not work at any time during the program; 1 left town, 1 was hospitalized and 1 refused services.

Because of the marked differences in the types of problems presented by clients with neurological difficulties (brain damage, epilepsy, cerebral palsy) and those with other types of physical difficulties, these two groups are presented separately. All those with neurological disabilities had a secondary disability of emotional disturbance. There were 7 clients in this category--4 under 31, 2 between 49 and 54.

The younger clients in the group presented problems similar to those who were emotionally disturbed and required considerable support in adjusting to employment. Contacts for this group ranged between 9 and 15 times and were directed to finding employment, helping clients to work through difficulty with work requirements, and with supervisors and co-workers. Counselor activity concentrated on job referral and preparation, checking with employers, discussing on-the-job problems, being supportive, and encouraging clients to seek psychotherapy. As with some of the younger EDM clients, the desire for training, or for a job which was beyond the individual's capacity, required considerable discussion of job requests, of how to take tests, interpretation of tests in relation to job opportunities and encouragement of clients to continue with work. All of these clients remained employed throughout the program.

Of the other 3 clients, 2 were hospitalized. The third, E.F., a 49 year old woman with epilepsy, was seen 24 times over a period of a year and accounts for the bulk of the problems in OTHER LIFE AREAS AND OTHER PROBLEMS. Although she was placed within the first 2 months and continued working throughout, her dependency on the counselor and the agency did not diminish. Throughout she continued to bring up complaints about the many agencies with which she had contact, asking for help in filling out forms, answering letters, etc. and was constantly involved in seeking help from all sources, by direct contacts and writing letters to government agencies and VIPS.

Of the other four in this group without emotional disabilities, 2 were placed immediately and continued working for the entire period. The other 2 did not work at all, 1 refused contact and the other left the state. Because of the small size of this sample it is difficult to draw any general conclusions. It can only be said that the 2 clients who were placed had only the initial problem of finding a job and, once placed, adjusted quickly and required no service.

DISABLED AGED

Characteristics

The 10 clients in this group ranged in age from 55 to 67. Five clients, (4 men and 1 woman) were classified as physically disabled, and 5 clients (4 women and 1 man) were classified as emotionally disturbed, severe.

Employment Data

Of those who were physically disabled, all but 1 worked at some time during the program. At termination, only 1 was still employed. Of those emotionally disturbed, all were employed at the time of continuation, and all but 1, who returned to the workshop, maintained employment throughout the program. Three were still employed at termination, and 1 had retired on social security.

The problems presented by the 5 physically disabled clients in this sample were mainly for help in finding a job. In two instances requests were made for a job change because the job was too physically demanding. Clients were active in seeking employment on their own, but, because of their limitations, depended on the counselor for placement. There were no problems of adjustment to work routines or dealing with supervisors or co-workers. At termination, 1 was still working, 1 was looking for employment, 2 were hospitalized (coronary and leg amputation), and 1 could not be placed because of the severity of his physical condition. It would appear from this small sample that the major presenting problem is finding a job within the physical capacity of the individual; maintenance of employment is largely dependent on health factors.

The 5 clients classified as Emotionally Disturbed, Severe, consisted of 1 married male and 4 single women. Since the patterns for all of them are so different they are presented separately.

The male was placed immediately, worked throughout the program and presented no problems other than the initial request for finding a job.

A female client, E.K., age 56, was placed while still in the hospital and later moved to a hospital group-home for women. She worked at the same job for 18 months, except for a brief period when she was temporarily hospitalized. Although many of the problems which she brought to the counselor were delusional in nature and she showed psychotic trends at intervals, this did not interfere with her functioning on the job. Throughout the program she was under psychiatric treatment and frequently sought out the counselor, who gave her continuing reassurance, tried to allay her anxieties, and gave her general support.

O.L., aged 61, needed help in finding employment, initially had a few complaints about work requirements and being under paid, but presented few problems and made a quick adjustment. Counselor activity was mainly concerned in finding employment, visiting the employer several times to prepare him for the client, and keeping in close touch with client's sister, upon whom O.L. leaned heavily.

F.W., a 61 year old woman with a history of 7 previous hospitalizations, had been placed after leaving the workshop. She continued working for 2 months, although she complained of being underpaid and of difficulty in keeping up with work requirements. She then became depressed, was hospitalized for a short time, and was placed again on her return. This time she presented no problems and continued working for 8 months, when she retired on social security. The counselor was active in finding her employment, and in encouraging client to continue working, although supporting her decision to apply for social security.

L.S., 63 years old, widowed, was the only one who did not achieve employment. She had been hospitalized for 19 years until her referral to the workshop. Although placed on a job, she worked only a month, had to be returned to the workshop. She was placed several times on short-term jobs during an 18 month period; although each time that placement was achieved L.S. enjoyed the experience, she displayed resistance and fear of working throughout. Most of the problems in OTHER LIFE AREAS and OTHER PROBLEMS were reported by this client. Counselor was active in attempting to motivate her, to encourage and prepare her whenever she was placed, and in dealing with the problems she encountered in the Family Care Home in which she was living. L.S. was not employed at the time the program closed and the outlook is not encouraging, in view of her fearfulness and real resistance to working. A contributing factor, which undoubtedly reinforced negative feelings about working, was the state requirement that her earnings be applied towards payment of her long hospital stay.

OBSERVATIONS

1. The mentally retarded made the quickest adjustment and required the least amount of follow-up after the initial adjustment.

2. The emotionally disturbed, severe, presented the largest number of problems and required more follow-up than any other group.

3. A large proportion of the mentally retarded and emotionally disturbed, mild, who were working upon leaving the workshop, or were placed shortly thereafter, remained employed throughout the program.

4. Although the period of adjustment to a job varied, it appeared that for younger clients in all disability groups, particularly for those with little or no work background, the initial period of preparation for employment, the period of actual placement and the first few months after placement were crucial.

5. Counselor intervention, beyond the initial placement and job adjustment, was helpful in maintaining employment for those clients who needed help with problems of advancement, change of employment and on-the-job relationships.

6. Role-playing of interviews and job situations seemed to be an effective technique in helping clients who had little or no work history, lacked confidence or were fearful about job interviews.

7. Contact with employers during and after placement of a client often enabled counselors to work out job problems before they became acute.

8. The role of the parent appeared to be a crucial factor in the adjustment of the younger client. In 8 cases where the parents were supportive and worked closely with the counselor and the client, it was possible to effect and maintain stable placements, despite the clients' initial fears and problems. In 5 cases where parents were either overprotective or exerted undue pressure, clients had difficulty in developing sufficient strength to cope with job demands, and either gave up the attempt or moved from job to job without making an adjustment.

9. There was some evidence that a discordant home situation, i.e., pending divorce, interfered with a client's job adjustment.

10. Although the number of cases was small, it would appear that the major need for the physically disabled with no emotional complications, and the disabled aged whose disability is physical, is selective placement on a job which is within the individual's physical capacity.

11. An additional period of workshop training, which is limited in time and focused toward job adjustment, may be a helpful therapeutic technique for a client who is unable to maintain employment.

12. The possibility of a negative effect of an unduly long period of skill training, upon a client who is apprehensive and fearful about going to work, merits further consideration.

13. Neither the number of hospitalizations nor the length of hospitalization appeared to be indicators by themselves as to whether or not a client would make an adjustment. Of the 24 EDS clients who were employed at termination, the number of hospitalizations ranged from 1 to 12 times; one client had been hospitalized for 10 years and another for 12 years.

14. There was some indication that a supportive family member, or a supportive member from the community other than the counselor, was a positive factor in job and life adjustment for the EDS client coming out of the hospital.

15. There appears to be some evidence that, if a client does not show any kind of movement towards becoming employed within a reasonable period of time (6 months), continuing contact may not be productive.

    In 8 cases, where contacts ranged from 34 to 62 times and were maintained throughout the program with no diminution of counselor activity, clients remained fearful, resistant to work, displayed continuing dependency on the counselor for help in all areas of living, and remained unemployed.

8

CASE ILLUSTRATIONS

The following cases are presented to illustrate some of the problems presented by clients and how these were handled by the counselors.

Mrs. C. R.

Mrs. R., a 41 year old divorcee, was referred by DVR for evaluation shortly after her discharge from a psychiatric hospital, the seventh since 1955. She has been diagnosed as a paranoid schizophrenic, chronic type. Her disability takes the form of hallucinations, agitation, inability to tolerate frustration and violent homicidal expressions towards those in her immediate environment. She gives the appearance of a heavily sedated person and shows a lack of affect and spontaneity.

The onset of Mrs. R.'s illness seems centered around the divorce action taken by her husband in 1955. Both children were taken by the husband and Mrs. R. has seen them only twice in the past ten years. She lives with her mother who is sympathetic, provides companionship and emotional support.

Mrs. R. left school in the 10th grade, worked as a salesgirl and a hostess in a restaurant until her marriage. Since 1960 Mrs. R. has made a few attempts to work, but has not been successful in holding employment on any sustained basis. Following the completion of workshop training, Mrs. R. was placed as server in a cafeteria, and seemed to be doing well. After a few months she fell while at work, became irregular in her attendance and finally stopped going to work. She kept breaking appointments with the counselor, became withdrawn and increasingly psychotic and finally in July 1966 had to be hospitalized as she was becoming homicidal towards her mother. Following a brief return home, Mrs. R. again had to be hospitalized and was finally released in September 1966. At this time she was under medication, appeared stabilized and was reaccepted at the JVS workshop since she did not seem ready for private employment. In October 1966 Mrs. R. was placed as a folder in a linen supply company and was still working there at the termination of the project.

Although Mrs. R. had initially been resistant to seeing the counselor, during this second period of training and placement, she has been receptive and on her own has requested appointments in order to discuss her job and general adjustment. The counselor has seen her two or three times a month to support her job efforts and to encourage her to continue with medication and treatment. Mrs. R. now seems more aware of her physical need to have adequate rest and continue with medication and of her emotional need to keep busy through employment and some social life. The counselor feels that Mrs. R. will need periodic follow-up since any new experience with which she cannot cope may cause her to disintegrate unless she has some external support.

Mr. R. Z.

For six months prior to referral by DVR for work evaluation, Mr. Z., a 27 year old single man, maintained himself on public assistance and lived an almost isolated life.

Background information revealed that he came from a broken home in which there was much dissension and unhappiness throughout his childhood. His father, an alcoholic, was separated from his mother on and off while Mr. Z. was in high school. Because of his unhappiness about his family situation, Mr. Z. became apathetic about school and when he was 16 years old dropped out. When he was 17, his parents were permanently separated and his mother became almost totally dependent on him for financial support until her death several years ago. Subsequently Mr. Z.'s father also died and except for one sister who apparently helped during his frequent periods of unemployment, he has had little contact with his other brothers and sisters.

Mr. Z.'s employment since his mother's death had been sporadic and he had not developed any work skills. He appeared depressed, showed negative feelings and was extremely passive. Work adjustment was offered as a way of helping him function on an organized sustained basis and of developing a healthier self image. Mr. Z., who was also given psychotherapy, showed improvement in the workshop and the follow-up plan was designed to help him secure and maintain employment and to work with him towards a vocational goal. Since Mr. Z. had good intelligence and verbal ability it was felt that he could eventually be helped to move up vocationally.

Shortly after completing workshop training, Mr. Z. was placed on a shipping job. The counselor worked with him to encourage his staying on the job despite his dislike for this type of work, and in working out a long range goal. Mr. Z.'s interest appeared to be in teaching or some other profession in which he could work with teaching. Since he could not get very far without further education, the first step was to work toward his high school diploma. Mr. Z. registered immediately at evening high school classes. He then revealed that he was on probation for having forged money orders. Since this was an obstacle which would stand in his way if he were to consider any area dealing with child care, counselor referred him to the Family Service agency which had a special program to deal with such problems. Ultimately the agency was able to obtain a complete commutation of the sentence which removed any record of the offense. Throughout this period the counselor acted as a liaison with the family agency, supported Mr. Z. on his job which he disliked but recognized as necessary in order to support himself, encouraged his going to school, and continued to counsel with him around a career goal.

As an added follow-up Mr. Z. finished high school, received his diploma in January 1968 and was accepted at T. University for the spring semester. The agency has now found him a part-time job at a halfway house for post hospitalized psychiatric patients where he will be a house supervisor and this will pay for part of his college expenses. The rest will be paid for by a scholarship loan obtained for him through the agency.

Miss F. B.

Miss B., a 36 year old single woman, was referred by DVR to evaluate her readiness for competitive employment. This was the fourth time that she had been given service by DVR. The previous attempts were not successful because she was not able to maintain herself emotionally and each time had to be rehospitalized.

Miss B., one of three children, lives with her mother who works intermittently as a sales person. The other two are married and out of the home. Her father had been a skilled craftsman who never earned enough because of excessive drinking. For the past 18 years he has been at the Neuropsychiatric Hospital. Miss B. has been withdrawn and isolated socially since childhood. Although never happy at home, she felt too insecure to live apart on her own. She dropped out of high school in the 11th grade as her grades were poor and she felt inferior to the other students.

Despite her lack of confidence and restricted life, Miss B. maintained a fairly stable work history as an unskilled factory worker until her first hospitalization in 1960. She was then employed on a job which required a good degree of skill, had been on it for five years and enjoyed the work. However, she began to develop a number of physical ailments, finally became confused and began hallucinating and was hospitalized. Between 1960 and 1963 she was in and out of the hospital three times. During 1964 she received intensive therapy at a day treatment center and for seven months prior to referral to JVS continued with weekly visits for individual therapy and medication.

After a period in the workshop during which she was helped through individual and group counseling to meet new situations which seemed threatening, Miss B. was placed in May 1966 as a punch press operator. Arrangements were made with the employer for her to leave work an hour earlier one day a week so she could attend her therapy session. The counselor kept in weekly touch with her for the first two months. Because of her difficulty in meeting production quotas which caused her much anxiety and many physical complaints, it was arranged with the employer to shift her to a less pressured job. Here she functioned well and received regular raises. Contacts were then lessened to once a month since Miss B. liked her job, and as verified with the employer, was doing well. In January 1967, nine months after starting this job, the company announced that it was moving from the community and it therefore became necessary for Miss B. to make a job change. Intensive job seeking took place in the next 2 months and in the middle of March counselor placed Miss B. as a packer. Because of initial difficulties on the job, he again saw Miss B. more frequently. She was fearful of not doing well and as a result felt that she was making too many errors. Counselor encouraged her to talk with her supervisor who reassured her that her job was going well and she seemed less tense and able to manage. However, in May Miss B. again began to feel depressed, developed physical symptoms and was referred back to the Day Treatment Center. With a change in medication her depression lifted and her physical symptoms vanished.

This improvement did not last long. Miss B. set higher goals for herself than did the supervisor, felt a keen sense of competition with the other workers and began to show signs of deterioration. Finally in July 1967 she left the job and returned to the hospital. At the end of September Miss B. left the hospital on home leave and requested return to the workshop as she felt that she could not face immediate employment in private industry. It was decided to permit her to return to the workshop in order to evaluate her readiness for re-employment. Miss B. returned to the workshop and was seen again in individual and group counseling. After two months it was decided that she could not be kept in the workshop because she was emotionally unstable, was not making any progress and was attempting to use the counselor as a psychotherapist. Miss B. accepted a referral back to the State Mental Hygiene Clinic and understood that she could come back to the workshop at such time as she would be more ready.

Mr. R. C.

Mr. C., a 37 year old married man, was referred by DVR for workshop evaluations because of a psychiatric disability which prevented him from working. Mr. C., his wife and a school-age child were being supported by the public assistance agency.

Mr. C. felt that his only disability was a partial paralysis of the right side and hand as a result of an automobile accident which he suffered in 1965, denied that there was any emotional involvement and did not consider himself disabled. He had held a variety of semi-skilled jobs as punch press operator, spot welder, grinder, etc., for seven years prior to his accident and the workshop evaluation indicated that his mechanical performance was far above the average of most of the others in the workshop. On the basis of the employment history which indicated a number of short-term jobs, his inappropriate behavior and talkativeness when sent out on interviews, and from information obtained from Mrs. C., there seemed no doubt that Mr. C.'s emotional disturbance was a serious factor in his unemployment, and was of longer standing than appeared from the hospital reports.

Counseling sessions with Mr. C. and with his wife disclosed that Mr. C.'s automobile accident had actually been a suicide attempt shortly after the death of his older child. In the early interviews Mr. C. was extremely verbose and talked of grandiose schemes such as doing research in electronics. He was also quite depressed and expressed much hostility towards his wife and his parents. Later he talked about the death of his daughter and the severe loss to himself and to the world because of her unusual ability. The counselor permitted this expression of feeling, but gradually began to focus the interviews on job referrals and Mr. C.'s job adjustment.

Mr. C. was first placed with the A. Tool Company as a tool grinder and from employer reports did well, but because of the many complaints he made regarding his physical condition was discharged a month later. He continued to sabotage other job interviews, had many somatic complaints and expressed many fantasies. On one job interview he gave the prospective employer tips on the stock market and expressed the belief that he could foretell the future and possibly even cause certain events to occur by means of exerting his will power.

Before sending him out again, the counselor role played in interview with Mr. C. to show him how inappropriate his behavior had been and also prepared him for a more structured interview with another employer where he would have to say little. In the next referral which was arranged with a company that was looking for production workers, Mr. C. was hired more on the basis of the application, rather than on the basis of the interview. Counseling sessions continued to provide Mr. C. with the opportunity to talk out his feelings about his relationships to his family and his response to his daughter's death, and to guide him in his re-established role as a worker.

At the end of four months of follow-up Mr. C. was maintaining himself on the job and there was an improved relationship with his wife. At his request, counselor maintained only minimal contacts. After fifteen months on this job, Mr. C. was successful in obtaining a position as a foreman at another company. His wife also helped to augment the income, and with the lessening of the economic stress, has come a decrease in erratic behavior and physical complaints and improved family relationships.

Miss A. T.

Miss T., 25 years old, was attractive in appearance, dressed neatly and in good taste. She was, however, very shy and withdrawn, rarely smiled, presented an almost wooden manner and was almost completely non-verbal. Her major disability resulted from congenital mental retardation, and there was a secondary disability of catatonic schizophrenia which had appeared when she was 18 years old. Miss T. attended special classes until the age of 16 when she dropped out. For seven months prior to referral by DVR to the JVS workshop, she participated in a retarded children's workshop. Testing indicated an I.Q. of 54, placing her in the retarded mentally defective range.

Miss T. is the only child of a mixed marriage. Her father is a working man and the family is in a low income group. The parents made few demands on Miss T., but hoped that she could learn to keep busy for a few hours a day. Neither parent had been able to establish a close relationship with Miss T.

In the workshop Miss T. performed best on tasks which were simple, and did not call for much judgment or instructions. She often "toyed" with work materials, forgetting the task at hand and when urged to produce or to modify work behavior became hostile. She disliked both co-workers and supervisors, felt that she was "picked on." Her method of handling unpleasant situations was to withdraw but when her hostility became too great and she could no longer contain herself, she would blow up at people.

Follow-up seemed necessary to help Miss T. become more verbal and develop interpersonal relationships on the job.

Miss T. was placed as a kitchen worker in a cafeteria immediately upon completing workshop training. Almost immediately she felt "picked on" and talked to her mother of quitting. Since she was at first resistant to seeing counselor and unable to verbalize her complaints when she did, these were communicated by Mrs. T. As a result of Miss T.'s inability to fill out applications and her fear of going out on referrals, counselor had enlisted Mrs. T.'s aid in going out with her daughter, and this paved the way for a closer intimacy between them, which enabled the counselor to deal with Miss T.'s problems.

The counselor's goal was to help Miss T. verbalize her negative feelings, encourage her to talk with her supervisor about her dissatisfactions with the job and to support her job performance. When Miss T. seemed ready to quit her job because she had been given additional duties of clearing trays and felt that this was dirty work which her co-workers enjoyed seeing her do, she was reassured by counselor that this additional assignment indicated increased responsibility, which in turn meant higher wages. At the same time counselor explored other job possibilities and discussed job hunting techniques, emphasizing the need to find other employment before quitting. Mrs. T. supported these suggestions and Miss T. stayed on the job.

Although layed off temporarily a short time afterward, Miss T. made no effort to look for other work. On her return she again became angry because she was given weekend work. She complained to her mother and to the counselor and it was suggested that she talk with her supervisor, which she was able to do for the first time. Although no change in assignment was made, Miss T. seemed more accepting of the situation and decided to remain. At the time the program terminated she was still working on this job. She has expressed satisfaction with the work and her feeling that her employer and co-workers have a good feeling toward her. The employer has commented on her change in attitude and expressed satisfaction at her performance. Miss T. has become closer to her mother who in turn has become more understanding and responsive to her daughter's needs.

Mr. A. L.

Mr. L., a 35 year old divorced man, was referred by DVR for vocational evaluation because of his difficulty in holding jobs. He was classified as an inadequate personality with mild anxiety reaction and mental retardation.

Although his appearance was adequate, his manner and attitude were of an immature demanding dependent person, perpetually seeking for the one who would make provision for his future well-being. Mr. L. attended school until he was 21 years of age at which time he was in the 8th grade. In 1962 he came to this city from his small home town in the South to learn spot welding at a technical school. Although he had never been able to hold down a welding job he has been sent out on a number of unskilled jobs by the school since 1963, none of which he held very long. The school has therefore refused further placement because of his record of leaving after a short time. Mr. L. has also turned down referrals by the Employment Service because he did not like the hours, or the rate of pay, or the policy of payment on a bimonthly rather than a weekly basis.

Mr. L.'s father and married siblings who live on a farm in the South have discouraged his attempts to return and his request for money with which to go into business. Mr. L.'s marriage was of short duration. There were no children and he has no financial responsibilities to his former wife.

Although Mr. L. operated at a minimal level while in the JVS workshop, it was hoped that with continued follow-up he might be able eventually to settle into a job. Following the completion of workshop training he was placed, but within four months had held three jobs. From August 1966 when follow-up began through November 1967 Mr. L. was seen between 2 and 5 times a month--a total of 40 times, in addition to his attendance at the Employment Club. Between August and November 1966 he held five jobs. While working on the last job he had gotten into a fight, required plastic surgery and did not work again except for occasional day labor jobs until March 1967 when he began to work at the Post Office.

During this interval between jobs Mr. L. was involved in a court action against his last employer, in seeking unemployment compensation, and in pressuring the DVR for placement with the Post Office. The counselor attempted to help Mr. L. accept the working conditions on the jobs which he held, to develop better self control, and interpreted the actions taken by his employers, the hospital, the Division of Unemployment Compensation and DVR. The counselor also acted in a liaison capacity with these agencies since Mr. L. had antagonized the personnel and was delaying his compensation as well as his possibility of placement at the Post Office. In addition Mr. L., who frequently called counselor at home at any hour of the night, brought up problems regarding the Employment Club, his desire to get married, and his involvement with a girl whom he was seeing. At times it appeared to the counselor that he called out of sheer loneliness, since there was no indication that he listened to or heard what the counselor said and his impulsive erratic behavior continued unchanged during this period.

As soon as he began at the Post Office, Mr. L. began to complain about the work being too difficult, that co-workers were taking advantage of him and he was transferred three times within two months. Mr. L. then began to press for a transfer to his home state so that he would be near his family. The counselor attempted to help him see his own role in the difficulties and although she offered him assistance in writing a letter requesting transfer, was firm that he would have to do it himself. By August 1967 he seemed better adjusted. He had been to visit his family who encouraged him to stay where he was and he had also discovered that there were no openings in the Post Office in his home state. This, together with his desire to get married, and his desire to keep his job which represents status and security, seem to be stabilizing forces. Nevertheless his adjustment is considered marginal and Mr. L. is still exhibiting impulsive behavior. In the last interview in November 1967 he reported a disagreement with his supervisor because he had impulsively left the job when ordered to work another two hours. Although the counselor was supportive, she was firm in his need to assume greater self control. Mr. L. was encouraged to consider further counseling services because of his continuing interpersonal problems and low frustration tolerance.

r. P. H.

BRIEF RECORDING FORM FOR COUNSELING CONTACT (FORM G)*

	PROBLEMS RAISED BY CLIENT	HOW CLIENT TRIES TO MEET PROBLEMS	ACTIONS TAKEN BY COUNSELOR
5/12/66	Help in finding job Pressure from mother	Actively seeking employment Seeks counselor	Made job referral Role played interview
5/24/66	Help in finding job Career choice	Actively seeking employment Trying to get more training Seeks counselor	Made job referral Gave occupational information
5/25/66	Help in finding job Pressure from mother	Actively seeking employment Seeks counselor	Made job referral (hired) Role played interview
5/31/66	Anxiety about job	Seeks counselor	Supportive
6/ 8/66	Help in finding job Feels discriminated against Lost job	Actively seeking employment Seeks counselor	Made job referral Supportive-encouraged job seeking
6/15/66	Help in finding job	Actively seeking employment Seeks counselor	Contacted mother - referred to family service Encouraged client
6/19/66	Help in finding job	Seeks counselor	Made job referral Contacted mother
6/26/66	Help in finding job	Seeks counselor	Reviewed job openings Encouraged job seeking
7/13/66	Help in finding job Pressure from mother	Actively seeking employment Seeks counselor	Made job referral (hired)
8/ 1/66	Trouble with supervisor Trouble with co-workers Feels is underpaid Feels job too hard	Seeks counselor	Discussed feelings of aggression, methods of approaching supervisor
8/15/66	Having trouble with supervisor Trouble with co-workers	Talks to supervisor Tells people off Seeks counselor	Discussed peer relationships Dealing with authority figures
/22/66	Having trouble with supervisor Trouble with co-workers	Talks to supervisor Tells people off Seeks counselor	Discussed peer relationships Dealing with authority figures
/ 7/66	Trouble with co-workers How to apply for Workmen's compensation	Tells people off Seeks counselor	Discussed peer relationships Referred to Workmen's compensation

*This is an extract taken from the record; does not include counselor's comments.

MR. Z. T.

BRIEF RECORDING FORM FOR COUNSELING CONTACT (FORM G)*

	PROBLEMS RAISED BY CLIENT	HOW CLIENT TRIES TO MEET PROBLEMS	ACTIONS TAKEN BY COUNSELOR
4/14/66	Difficulty with work requirements	Talks to supervisor Seeks counselor	Visited client on job
5/ 3/66	Difficulty with work requirements Feels job too hard Marital problems Need for medication	Talks to supervisor Seeks psychiatric help Seeks counselor	Called employer Visited client on job Contacted wife Supportive counseling
5/23/66	None		Supportive counseling
6/ 7/66	Difficulty with work requirements Feels job too hard Marital problems	Does nothing Seeks counselor	Called employer Advised to contact wife Reviewed job problems Supported progress on job
6/15/66	Feels is underpaid Feels discriminated against Need for medication	Does nothing Seeks counselor	Advised to see psychiatrist r medication Reviewed job problems Supported progress on job
7/ 7/66	Feels is underpaid Marital problems	Does nothing Seeks counselor	Called employer Advised to ask for increase Contacted wife
7/14/66	Marital problems	Seeks counselor	Referral to Marriage Counseli Service
8/17/66	Marital problems	Visits Marriage Counseling Service Seeks counselor	Called employer Supportive counseling
9/19/66	No job problems Marital problems	Visits Marriage Counseling Service Seeks counselor	Supportive counseling
10/10/66	No problems		Supportive counseling
11/16/66	Marital problems	Seeks psychiatric help Seeks counselor	Contacted wife
12/19/66	Reconciled with wife No problems		Supportive - praised fine adjustment to job

*This is an extract taken from the record; does not include counselor's comments.

CHAPTER V

ADDITIONAL PROJECT ACTIVITIES

CONFERENCES HELD WITH PROJECT COUNSELORS

Three conferences were held with project counselors between December 1965 and June 1966 in order to: interpret procedures, discuss mutual problems and interchange ideas. The final conference held on October 31, 1967 just prior to the close of the service program was devoted to an evaluation of the program. A summary of the discussion follows:

1. CLIENT SELECTION

There was consensus of opinion that selection of clients who need continuing service beyond workshop and immediate job placement could only be made at some point during the period of work evaluation or work adjustment training. Continuing need of the client and his ability to accept and use further service is based on observation and evaluation of client progress in the workshop, and a total impression gleaned from the counselor's own experience in working with other clients, as well as his knowledge of the job market.

Such cues as attendance and punctuality, progress in moving toward production standards, ability to relate to co-workers, foremen and other persons in the workshop environment, impulse control, anxiety level in new situations, development of psychosomatic symptoms under stress, reaction to family pressures, enable the counselor and other workshop personnel to determine areas in which the client has made progress, areas of continuing difficulty, ability to use further help, need for other types of service and the client's general readiness to move out into the labor market.

Counselors made the following general observations regarding disability categories:

The Physically Disabled. There was general agreement that persons with a clear cut physical disability are usually not in need of intensive follow-up. It was noted that these constituted only a small number in the sample.

The Emotionally Disturbed. Clients who are selected while still in the hospital or shortly after leaving need help in adjusting to the real world in regard to housing, financial management, socialization, medical and psychiatric supervision and therefore require intensive follow-up and comprehensive supportive services.

As a group, the schizophrenic clients seem able to benefit from intensive follow-up. Positive signs noted during the workshop period are: the ability to verbalize their fears and to relate to the counselor, adherence to taking prescribed medication and keeping medical and psychiatric appointments.

The paranoid, suspicious client who is hostile, irritable and unable to form a relationship with the counselor is usually not able to accept and use follow-up service. Although he may accept a period in the workshop because this is the only way in which he can secure employment, once he has a job he seems to want no part of agency service, unless or until he runs into problems.

The Mentally Retarded. Many within this group were found to be pseudo retardates who were well motivated and responded to workshop training and placement. Those who were of lower intelligence, but were well motivated, required close supervision and repetitive training within the workshop, and close follow-up, but seemed able to use help and move toward job adjustment.

Two types of retardates were identified by one of the agencies as not amenable for employment in the labor market:

1. Those with a severe learning disability who are unable to meet production standards in the workshop, but who may be able to function in an extended term shop.

2. The mental retardate who is both physically underdeveloped and emotionally immature and manifests childish behavior. These clients who can usually be identified by their physical appearance, appear to be suffering from a maturational lag and typically show little psychological growth during the workshop period.

The Disabled Aged. Many in this age group were physically disabled. Those who required employment which was not too dissimilar from what they had previously done, required less intensive follow-up than those for whom there had to be a drastic change in type of employment. Essentially the service which these clients needed was job development and job placement. It was noted that employment was frequently not maintained because of health factors, rather than because of job adjustment problems.

2. LENGTH AND INTENSITY OF FOLLOW-UP

Counselors were in agreement that preparation for follow-up should begin while the client is still in the workshop so that there will be no gap in services between leaving the workshop and starting on a job. Counselors emphasized that follow-up is an integral part of the rehabilitation process and should be looked upon as a continuum of service extending from acceptance into the workshop to the point when the client is considered to have made a vocational adjustment; the process should be explained to each client at the point of intake.

From the counselors' viewpoint, assigning the same counselor from intake through the final closing of the case has two positive effects--the counselor has the ongoing responsibility to a given client and the opportunity to observe the client's progress and development; the client is afforded, perhaps for the only time in his life, the opportunity to develop an ongoing relationship with another person. This procedure does not preclude the use of other workers and services, but has the advantage of fixing the responsibility on one counselor with whom the client can identify.

Although this was considered the ideal solution, it was recognized that this may not always be possible. Therefore if a new counselor is assigned, he should start seeing the client in the workshop about a month before he is due to leave, so that there is an opportunity to develop a relationship and to prepare the client for moving into private employment.

There was agreement that the length and type of service should be determined with each individual on the basis of his needs. There are some clients who make an adjustment in the first few months and intensive follow-up may therefore not be needed for a lengthy period. It was also important to determine whether continued follow-up might arouse resentment or create dependence upon the counselor. For some clients it was therapeutic to shed the identity of being a "client" and to assume the role of worker.

In regard to the question as to whether there was an optimum period of follow-up there were some differences of opinion. Two counselors felt that there should be an open-ended and non-limited period of follow-up for all clients. Although all counselors agreed that there are some clients who display a characteristic cycle of adjustment on a job, breakdown, return to the job, breakdown, etc., and seem to need lifetime care, it was recognized that making services available to such clients would have to be on the basis of an agency or community policy over and beyond that recommended for the majority of clients.

There was a consensus in favor of some time limit as an effective device in moving toward job adjustment, since this tends to develop a sense of urgency both in the counselor and the client. For most clients within the study, the adjustment was made within the first six months. However, the factors of readiness for job change, re-hospitalization or a short return to the workshop (primarily for the emotionally disturbed group), may necessitate a longer period of follow-up. It was therefore agreed that follow-up service should be available for a year with an evaluation to be made at the end of six months to determine whether continuing services were needed.

3. CRITICAL PERIODS DURING THE FOLLOW-UP PERIOD

Four critical periods were identified:

1. The initial period of preparation for job placement. For many clients this may involve learning how to dress for an interview, how to travel, how to talk with an employer, how to act with co-workers. Counselors have found that this must often be concretized by filling out applications, role playing, accompanying the client to job interviews.

2. The first day on the job. The counselor should be available to the client who may need to telephone during the day or talk with him after the day's work.

3. The first month on the job. During this period in which the client is adjusting to his new role as a worker, he often has need to call upon the counselor for help in regard to questions around performing his job, and/or relating to co-workers and supervisor.

4. The point where the client is thinking about a job change. For some clients this may come shortly after the initial adjustment, for others after five or six months. In order to forestall impulsive action and to assist the client in planning for changes, the counselor must be alert to the client's expression of dissatisfaction with his earnings, or desire to advance. Many clients need help in evaluating whether they are ready to ask for a raise or to move to another job, in knowing how to approach an employer, and in planning for a new job before leaving the one on which they are working.

4. TYPE OF SERVICES REQUIRED

It was agreed that in working with severely disabled persons, there is a need for comprehensive services which includes not only the vocational, but the personal social and medical needs of the client. Many of the problems which affect the client's functioning on the job, both in the workshop and in private industry, are non-vocational. Needed services which should be provided by other community agencies are family counseling, psychiatric treatment, medical service, financial planning and recreational and socialization programs. Services which should be provided by the vocational agency include workshop evaluation and adjustment training, individual counseling, job placement and job development. In addition it was felt that group counseling programs are particularly effective in working with the mentally retarded and some of the emotionally disturbed clients. It was thought that remedial education might also be included within the workshop program.

In discussing the services provided by their own agencies, counselors brought up the importance of flexible time schedules so as to permit counselors to adjust their hours to meet the needs of their employed clients.

Special note was made of the importance of job development and employer education and of the employer's role in helping a client make a job adjustment. The program has enabled counselors to develop job openings for specific clients, to prepare the employer for the client, as well as the client for employer, to participate in job interview, and in some instances to spend part of the first day in interpreting instructions to the client (this has been particularly effective with the retardate). As a result of this ongoing type of relationship, many employers have become sensitized to client problems and have been able to alert the counselor before a problem developed.

5. NEEDED COMMUNITY SERVICES WHICH WERE LACKING

With the exception of two cities, counselors reported a serious lack of medical and psychiatric follow-up services, particularly for those clients coming directly from a mental hospital, some of whom were discharged with no provision for medication, housing, financial aid or supervised psychiatric and medical follow-up.

Counselors were agreed that for the schizophrenic patient, the taking of medication on a regular basis is perhaps the single most important factor in his vocational adjustment. In addition, many clients need help in managing finances, making living arrangements and using recreational facilities and other community resources. Although some of these services may be available, in some communities there is a gap in communication among agencies and a lack of designated responsibility. Because of this, many of the project counselors have had to take over and help their clients in these areas. In view of the multiplicity of the problems which many of the clients face, it was agreed that having a social worker on the rehabilitation staff could be a valuable aid in making appropriate referrals, acting as a liaison with other community agencies and making known the lack of needed resources.

Another problem is the lack of extended term workshops for those clients who cannot meet the requirements of private industry, but are motivated and able to maintain the productive pace of a sheltered workshop. Counselors noted that such clients had often made remarkable progress, and could be semi-supporting if there were suitable facilities.

SOCIOLOGICAL OBSERVATIONS

Following a suggestion made by SRS, the project plan was supplemented to include a sociological study of the rehabilitation processes involved in the project. The precise objectives of the study were left to be worked out by the Project Staff. After consultation with Professor Ernest Smigel, Head of the Department of Psychology at New York University, the Project Research Consultant (Dr. Walter S. Neff) formulated a series of questions which could be answered by direct sociological observation. These questions were focused on the sociological features of the basic rehabilitation process at issue (the rehabilitation workshop), rather than on the sociology of the continued counseling process which was the chief variable of the present research. The reasons for this decision were: (a) that there was more to observe in the former rather than in the latter; and (b) there was a possibility that the rehabilitation milieu in the different agencies might have some differential effects on project outcome. Specifically, it was planned to secure data which would illuminate three questions:

1. Whether trainees see themselves as clients or workers

2. Whether trainers function as foremen or therapists

3. Whether the workshop suggests the atmosphere of a clinic or a work setting.

Six of the eleven participating agencies were selected for study, three in the midwest and three in the east. The six agencies were chosen to be representative in terms of size, client population, and variations in workshop procedures. Two industrial sociologists spent an average of 2 to 3 days each in the three of the six selected agencies, interviewing clients and staff and observing operations. One of the two sociologists was able to return to his three observed agencies for a second series of observation about two years later.

The first series of visits were made in the early part of January 1966. Dr. Irving Gelman, Associate Professor of Sociology at New York University visited three workshops in the east and Dr. Sherwood B. Slater, currently Assistant Professor of Sociology at Emory University, Atlanta, Georgia visited three workshops in the midwest. This first series of visits focused primarily on questions 2 and 3. In the winter of 1967-68 Dr. Slater, who expressed interest in doing further study, returned to the same agencies which he had previously visited for further observations in regard to question 1.

Although each of the consulting sociologists filed a report, these documents are too extensive to include in this Final Report. The chief findings of these reports are summarized below. These summaries are presented for their intrinsic interest, although no effort could be made, within the project research design, to relate the sociological data to the outcome criteria of the study. In the opinion of the Project Staff, however, these sociological data, while insufficiently systematic in the present case, suggest a number of issues which bear upon vocational adjustment, and provide important suggestions for future research.

Dr. Gellman's Observations

The fundamental issue appeared to be the extent to which each agency pursued a particular course of action and the extent to which the clients responded to the policies and activities of the agency in this context. Although there was agreement about the ultimate objective of the workshops with respect to the placement of clients in job situations which they could retain, some differences emerged because of differences in size, number of clients served and total personnel.

AGENCY A seems to have arrived at an excellent balance between its industrial needs and its rehabilitative functions. The liaison between the industrial staff, the clients and the professional counseling personnel, seems to be provided by the workshop director, a trained counselor, in his dual capacities in the workshop and counseling areas.

The workshop is on the same floor as the core agency. Counselors are part of the regular agency staff and are housed in the core agency. The workshop director has his office in the workshop.

There is an industrial atmosphere in the workshop, modified by overtones of a protected and sheltered milieu. The clients work hard and know they are expected to produce. For them work is certainly real but, simultaneously, they are aware that they are striving for a rehabilitative goal. The clients know that they are being prepared for a "real job" on the outside.

The industrial staff is concerned with productivity and quality of work done, but always with the awareness that the primary objective of the work program is related to the needs of the client. The professional staff, although primarily concerned with the rehabilitative aspects, is aware of the need to maintain production schedules and a steady supply of work.

AGENCY B has its own unique characteristics. The central office and placement service are geographically separated from the workshop. Because of the relatively large dimensions of this operation, the structure and procedures are organized along more formal lines.

The division of labor is more pronounced and diversified and the lines of authority are clearly delineated. The work-sampling program and the intensive evaluation program seem to produce a school or vocational training atmosphere. The prevailing philosophy is that clients should never perceive themselves as occupants of real jobs, but rather that the work which they are performing is part of the therapeutic process. Some of the clients see the workshop as a school, others see it mainly as a vocational training center. For the most part the clients do understand that the ultimate objective is employment in outside industry.

AGENCY C was the smallest of the three at the time of the visit. This workshop is in the same building as the core agency but is on another floor. The rehabilitation counselor, whose office is in the core agency, spends part of each day on the workshop floor. There is a counselor-foreman who spends all of his time on the workshop floor.

As in the other two agencies, the work situation is quite real, but the program emphasizes the ultimate objectives of therapy and job placement. For the most part, clients understand that they are involved in a program structured to provide them with the emotional and technical tools with which to maintain themselves in outside employment. The utilization of standbys tends to stress some of the productive aspects of the situation, but the standbys themselves, many of whom are elderly, find the work of emotional and ego supporting value. This shop is the only one of the three utilizing the counselor-foreman and this duality of role merits further study, since there may be difficulties in striking the right balance between production demands and counseling considerations.

Dr. Slater's Observations

I. This first series of observations were directed at ascertaining the structure, organization and philosophy of the three workshops. Information was obtained about the setting, client population, agency organization, the roles of the counselor, foreman and clients and the concern with production.

AGENCY D. The agency and workshop are located in a large warehouse type building in an industrial-commercial area. There are a number of shops ranging in purpose from the assessment of client's abilities to a program of functional capacity and ability to perform in a manner suitable for outside employment. Each shop contains about 30 persons working on an assembly line or in groups at bench procedures. There are a large number of visibly physically handicapped individuals, as well as emotionally disturbed, retarded, aged, etc.

AGENCY E occupies one large rear room on the second floor of the building which also houses the agency. The shop contains about 25 persons seated at benches in groups of four to six. Clients work on bench operations and assembly line types of procedures. There are a number of permanent long-term elderly clients who are integrated with clients who are in the shop for a short term of evaluation and work adjustment training.

AGENCY F is located in the basement of a large office building in the heart of the downtown section of the city. The JVS agency is located on another floor in the same building.

The workshop contains between 20-25 clients, most of whom are quite young. This is a short term shop restricted to evaluation and work adjustment training for a maximum of ten weeks. There are six large tables used for collating, assembly line and individual work.

The Role of the Counselor

The counselors in the three agencies fulfill a similar role with respect to the concern for directing the client through the work adjustment process, and as a means for communicating diagnostic and treatment concerns to the rest of the staff. Within each agency there is an individualization of the client, so that the programs are modified or designed to meet the client's particular needs. The counselor also acts as liaison between the agency and the outside community, particularly with respect to other agencies involved in the client's program.

In Agency D the counselor is responsible for the client to the point of placement. At that time, referral is made to the agency's placement personnel, who take responsibility for locating a job, preparing the client for entry into the job and checking on his progress through the first few weeks. In Agencies E and F the counselor maintains responsibility for placement. In all three agencies, follow-up service, which may be requested by a client for one year, is provided by the counselor who originally worked with the client.

The Role of the Foreman

In all three shops, the role of the foreman seems to be similar in terms of actual activity: supervising the clients during their time in the workshop, maintaining some check on quality and quantity of production, maintaining individual client production records and observing the clients' behavior. The foremen set up the work, train the clients in the daily operations and, to varying degrees, supervise the clients' activities throughout the day. The great difference in the role of the foreman appears to be the extent to which they become involved in "treatment," the extent to which the foreman's observations are utilized in making decisions and plans for or with the client. In Agencies D and E, the foremen are industrially trained and not involved in the treatment process. In Agency F where the foremen are trained as counselors, there are regular planning conferences in which the counselor-foreman, the counselor and their respective supervisors participate.

Observations and Findings

DO THE TRAINERS FUNCTION AS FOREMEN OR THERAPISTS?

The manifest role of these individuals is obviously similar to that of the foreman in the industrial setting. Their principal concern is with getting the job done. While they may be somewhat more friendly than one expects to occur in the industrial setting, the observations of the interaction between client and foreman suggests that the foreman role is well played from the viewpoint of the client.

From the standpoint of the foremen themselves, they see very clearly a dual role and in some instances the two roles are unequal in importance.

WORKSHOP D. The foreman, known as the training supervisor, is seen by the counselor as a foreman with some added knowledge and ability to observe and deal with behavioral problems. However, he is not expected to give therapy, modify client behavior or go much beyond what is required of a supervisor or a foreman. From the viewpoint of the training director the use of the work situation is in and of itself a learning and adjustment process.

Contacts between foremen and counselors are mostly formal and relate to problems of client performance and client behavior. From observation, they appear primarily to have training and feedback responsibilities rather than acting as instruments of change or adjustment. They provide information about how the client behaves, how he progresses, his output and reliability during his period in the workshop. The foremen verbalize a concern with the fact that they are in a good position to judge client behavior and would prefer a larger amount of formal responsibility for deciding what is done for and with the client.

WORKSHOP E. In this workshop the "foreman" is a specific title assigned to one man trained and experienced in industry. He operates and sees himself primarily as a "foreman-type." However, the shop supervisor acts in the role of both counselor and shop supervisor. For the shop supervisor who is by training a counselor there seems to be a fair amount of balance in the roles of foreman and of counselor, with an opportunity to observe the duality of the foreman's role.

WORKSHOP F. In this workshop the role of counselor-foreman is institutionalized in the name and in terms of the day-to-day activity. There is an approximate balance between the foreman and counselor role, with the former being overtly more prominent. The foremen have either worked as counselors or have training as counselors. Furthermore, those who are counselors have had workshop experience and counselors move from the workshop to the counseling role and back. A number of counselors indicated that they felt the role of foreman-counselor was difficult and demanding; consequently rotation was necessary to avoid problems of continued performance in a difficult position.

DOES THE SITUATION PARTAKE OF THE ATMOSPHERE OF A CLINIC OR A WORK SETTING?

In all three workshops there is a combination of both clinic and work-setting. The clinical milieu of the office is suggested by the desk, the recording equipment, pictures, etc. However, these offices are for the most part physically separated from the workshop.

The workshops themselves are busy places and give the impression that regular work is being done. The question was specifically asked of individuals who had industrial experience as to the extent to which they thought the workshop was an approximation of a "true industrial" situation. In most instances, they stated that these workshops did simulate, to a great extent, conditions in industry, and the situation was different only in the tolerance on the part of the shop staff for unusual behavior, which if manifested in outside industry would precipitate one's discharge or draw a reprimand. This was the only deviation, along with scheduling and pricing based on low productivity, that apparently existed. The operation of the shops and their atmosphere, for the most part, suggests that these are work settings and not clinical ones.

It is suggested that, in terms of the questions raised for initial study, the three shops do not differ greatly in the extent to which their clients see themselves as workers. It is the dual function of foremen as both counselors and trainers that the greatest variation is noted among the three shops. The evidence indicates that the workshops present the atmosphere of a true work-setting.

II. The specific aim of the second series of observations is to describe the role of the client in the workshop, ascertain client-perceptions of counselors and workshop personnel, and client attitudes towards the agency and his experience in the workshop program.

Findings are reported separately for each workshop observed and these are then compared with the other agencies. The data were obtained from interviews conducted with clients.

No personal information, social history, etc., was obtained from records or from clients. The purpose of the interview was explained to each client and his consent asked. There were no refusals. Such questions or items as the following were asked: what the client liked or disliked about the program, what he had learned, what he saw as the counselor's role, what did the counselor expect of him, what he saw as the foreman's role, what did the foreman expect of him.

AGENCY D. In this agency there is no universal progression of clients through "stages." The combination and order of stages is determined separately for each individual. Time is not a definitive factor in the assignment of clients to different shops and the critical differentiation occurs in the stages or shops themselves. While there is a wide range of tenure in the agency, the majority of clients interviewed had been there for less than a year.

A total of 18 clients were interviewed. Each client indicated the aspects of the workshop experience he liked best. Only one chose an aspect related to training. Most of the others indicated social activities as the thing they liked best about the agency. The report of dislikes ranged from general statements to specific dislikes which focused on two aspects: dislike for the low pay scale and for the level or kind of work being done.

As seen by 11 of 12 clients in the training shops the most important things learned were competencies in task performance rather than skills in interpersonal relationships. The majority of this group of clients saw themselves as workers rather than clients or trainees. All but one of the clients saw the role of the counselor as being one of helping the client adjust to the work situation. They were unanimous in their definition of the training supervisor's role as one of extracting productive work by showing how work had to be done, seeing that things went smoothly and giving thorough supervision. None of the clients seemed to have any trouble distinguishing the counselor's and training supervisor's roles from each other, although there were perceived to be common elements.

The 7 clients in the skills programs indicated that the most important things learned were related to task competency and the ability to do a job, but in addition identified social competencies as being important things learned from their experiences in the workshop. All of the clients in this sample saw themselves as workers. The role of the counselor was fairly well differentiated from the role of the training supervisor, with the latter seen as responsible for client productivity.

AGENCY E. Since the previous visit, the workshop has been moved to new quarters in a building several streets away from the JVS office, and the workshop staff has been expanded. The 2 counselors' offices remain in the JVS building.

Since the workshop was on a reduced production schedule at the time of this visit only 8 work-evaluation clients and 8 extended-term clients were available for interviews.

Length of time in the workshop for work-evaluation clients ranged from one day to nine weeks with an average time of five weeks. Most of the clients indicated that the most important things learned were related to specific or general work skills. Other areas of importance were attitudes toward work and self, and work habits. The majority of these clients do not view their experience as job training or employment, but report their expectation to be for work-evaluation or work-adjustment experiences. Despite this, they defined their own role in terms of work, i.e., their primary responsibility was to work, to do their jobs as best they could, to produce, to follow the rules, etc. They see themselves as learning to become workers; they do not have "jobs," but instead can be said to be "working at becoming workers." The agency provides a socialization rather than an employment situation, and the presence of long-term workers does not seem to interfere with this image.

The extended-term clients saw themselves as workers, but felt the primary gains were in terms of diversion, something to do and/or as a small supplementation of other income.

There was a clear distinction between counselors and foremen by both groups. The foreman was seen almost exclusively in a work relationship: supervising, directing and teaching. Counselors were seen almost entirely in a helping role: one which dealt with a wide array of clients' problems, and also encompassed the problems of job placement.

AGENCY F. In this agency 13 clients in different stages of training were individually interviewed, 10 participants in a discussion group were observed, and 9 clients collectively participated in an interview-discussion session.

Two clients awaiting workshop placement saw the workshop as a training experience; they also expected that a consequence would be to learn more about their capabilities and limitations.

Four of the five people seen in the early workshop phase indicated that the most important thing they had learned was how to get along with people. Very prominent in their responses was the perceived expectation by foremen that the client would stay out of trouble, get along with people, learn the rules and regulations of the workshop.

For the most part the clients were unclear or saw no difference between the concerns and expectations held for them by counselors and foremen. In general, the role of the foreman, as perceived by the clients, was to supervise, set up work, keep an eye on the workers and see that people got along with each other. For several of the clients the monetary reward was unimportant, although further probing did indicate that they seemed to have unrealistic monetary values. Several clients indicated that they saw the program as a work experience.

In the later workshop stage, the 4 clients interviewed indicated that the most important things they had learned during their experience in the workshop were related to work skills, attitudes and work rituals. Only 1 client recognized any gains in the area of interpersonal relationships. For the most part "getting along with people" was not a central problem or an important aspect of the workshop experience. They did not see any difference between the counselors and the foremen either in what they did or how they acted.

In the post-workshop stage, the majority opinion was that the most valuable things they had learned were work habits, skills and attitudes, conformity to work rules and how to get along with people. The majority of clients in this group seemed to think that the interpersonal aspects had been quite critical.

For the majority of all the clients, the workshop experience was seen as helpful and worthwhile. However, they did not see this as job training and several doubted how representative the shop was of "real work" situations. They offered suggestions that indicated a desire for more specific job training and evaluation, e.g., greater diversity of "jobs," more vocational preference testing, increased opportunity to learn how to operate different kinds of office machines, power tools, etc.

Most of the clients see the program as a training setting rather than a therapeutic one; nowhere in the various interviews is there indication that clients had a perception of themselves other than that of a "worker." They did not consider themselves as clients or patients.

For those completing the program, there is recognition that job training in the traditional sense has not occurred, yet the clients seem to consider their experiences as having contributed a better understanding of their own limitations and capabilities, and as having provided them with a reference point for the further development of their occupational roles. In addition, the monetary rewards of employment, as meager as they are by community standards have a great deal of meaning to many of the clients.

Comparison of the Three Workshops

The three agencies have in common the location of their workshop facilities close to the business center of their respective cities. The facilities differ, however, in type (warehouse, loft, office building) and these might account for differences in the environmental cues received by clients. The agencies also differ in the extent to which the counselors' offices are physically integrated with the workshop area and it is possible that this may account for the degree of differentiation by the clients of the counselors' and foremen's roles.

The organizational structure of the three agencies differs considerably and this is related to the size of the agency in general. A number of questions can be raised about the roles of counselor and foreman as they are related to organizational complexity. The various aspects of organizational arrangements may be related to significant variations in the client career, attitudes, values and behavior and in the outcomes of work adjustment programs. There is also a vast difference in the tenure of clients. In the Agency D workshop there is no time limitation and the average tenure is considerably higher than in the other two.

DO TRAINEES SEE THEMSELVES AS CLIENTS OR WORKERS?

In examining the role of the client three items are considered: the expectations that clients see others have for them, the extent to which clients see their activity directed toward production, and how they see themselves in relation to the agency.

There are noticeable differences in client role among the three agencies. The Workshop D clients were definitely production-oriented and saw themselves as workers, not as clients receiving treatment or as trainees. For the Workshop F clients the principal orientations of worker and trainee seem to coexist. The role definition by Workshop E's clients entails the components of worker, trainee and client. The clients' concern with production is not as prominent as it is in the other two workshops, but it is recognized by clients that they are expected to produce efficiently. Coexistent, however, is the awareness that they are in an evaluation/adjustment and training situation. This is in contrast to the other two agencies where it was rare for a client to recognize these inherent aspects of the workshop experience.

Client Perception of the Roles of Counselors and Foremen

In Workshop F the greatest overlap and coalescence of counselor and foreman roles occurs, in the definition of the foreman role given by clients as well as by incumbents and their co-workers. The job title of foreman-counselor reveals the dual dimensionality of the foreman's role and this is revealed again in the clients' inability to distinguish between foremen and counselors. There would appear to be considerable overlap of function, while only the supervision of production would appear reserved for the foreman. The situation may be further confusing for clients by the policy of rotating foremen and counselors periodically. There is also evidence to suggest that this similarity in function and duality of identity may be a source of strain in the relationship of counselors and foremen.

Quite the opposite is that which is found in the E workshop. The responses of clients indicate that their referent for defining the foreman role is primarily the nonprofessionally trained staff, the "real foreman" rather than the shop supervisory staff, who are professionally trained. The principal function for this "real foreman" referent is one of supervising, teaching and leading the client in his work. The counselors have entirely separate functions which are much more diffuse and related to the over-all adjustment of the client to his life situation, not his adjustment to workshop as appears in the other agencies.

In the D workshop the situation comprises components of the other two shops. The clients can distinguish between persons who are incumbent in the counselor and foreman roles, but the perceptions of their functions indicate a duality similar to that in the F workshop. The principal overlap is that from the clients' definition both counselors and foremen help the client adjust to the work situation, but each has additional distinct functions: the foreman supervises work and production, the counselor helps the client with personal problems. The clients' definitions of roles compare favorably with those by the incumbents.

In conclusion, there are a number of critical differences that have been identified from these observations of the three workshops. Granted biases that are inherent in the methods used, the findings nonetheless raise a number of questions deserving of more intensive examination and more rigorous methods. Of particular interest and promise is a more extensive examination of the organizational structure, the client role and career in the agency, and the subsequent changes in client behavior, adaptation and employment.

CHAPTER VI

DISCUSSION AND CONCLUSIONS

The essential question to which this research and demonstration project was directed was whether disabled trainees who received a vocational rehabilitation service with a substantial workshop component, and who were helped thereby to enter the labor market, would profit from a subsequent counseling service. It was originally hypothesized that such a post-program service would help the client maintain his employment once he had been assisted to enter or re-enter the labor market. The findings support a conclusion that the introduction of an experimental variable of post-program counseling results in modest but statistically significant differences on 3 maintenance of employment indices between the experimental and control groups. In general, it might be said that Es increased their employability by about one fifth of the amount which might be expected without the extended counseling service. In terms of persons, given an experimental sample of 307 individuals, it can be argued that 40 or 50 of these clients might not have obtained any substantial vocational success without the experimental program.

CHIEF FINDINGS

The findings support the main hypothesis of the study that a continuing post-workshop counseling program contributes to the vocational adjustment of workshop trainees, with some indications of differences in results between different disability categories.

Among the results there are several that require discussion.

1. Effectiveness of Total Program

We note that the relatively moderate differences in vocational outcome between the Experimental and Control groups must be viewed from the context of general rehabilitation effectiveness. As already indicated, there was a high level of success in rehabilitation for the total sample, leaving little margin for additional success within the experimental groups. In the control group, the percentages of those employed at least part of the time was 74%; they maintained employment about 59% of the available labor time during follow-up and 57% were employed at the end of that period. These figures indicate an upper limit to the degree that the experimental program can make a difference. Placement can increase, for example, only from 74% to 100%. The performance of the control group sets fairly high base rates, leaving room for only modest improvements. The final outcome, however, suggests that the post-workshop service adds substantial increments of success.

A more dramatic comparison might have been possible if the study had been limited to clients who were unsuccessful in securing employment after completing the workshop program. This had been projected in the original research design but, because of the interest of the participating agencies and SRS in the welfare of all clients who had been served in the workshops, it was abandoned in favor of the present study.

2. Differences by Agency

Uniform procedures had been established in order to make the services provided by the participating agencies as similar as possible. However, there remain certain differences among the serving agencies, which could not be eliminated and which undoubtedly influenced the counseling process. One of these differences had to do with the kinds of client populations served by the participating agencies. Within the disability categories accepted for the program, there were variations among the agencies. Two of the agencies had a high proportion of mentally retarded clients, and accounted for the bulk of the sample in this category. Three agencies had a majority of the emotionally disturbed clients and one agency specialized in serving the disabled aged. To some degree, differences in outcomes by agency (see Table 6, Chapter III) simply reflect the fact that agency samples have different mixes of disability groupings. An example is an agency which confines its services to the disabled aged. Since employment outcomes in this disability category are generally poorer than in others, this agency appears more inefficient than other agencies; but the difference simply reflects sample characteristics.

Another factor was the differing agency emphasis on post-rehabilitative services following workshop training. Several of the agencies had already developed procedures for follow-up service prior to the study. These varied in length from three months to twelve months, having been worked out in agreement with the local state rehabilitation agency. Every effort was made by these agencies to select those clients for the control group who were not receiving service under this arrangement, and to limit service to job placement only, when asked for further service by clients who were selected for the control group. Those who required more intensive post-workshop service were dropped from the control group, so that they could receive the services which they needed. Most of the agencies were successful in maintaining the purity of the control group, but two of the agencies had such highly intensive placement programs that there is some question as to whether their controls constitute an unserved group so far as counseling was concerned.

A better test of the hypothesis would have been a situation in which the control group was not given any agency service. However, the JVS's are service oriented and are so viewed by clients and referring agencies, so that it was difficult to deny an available service to any client in need, even if this resulted in some contamination of the control group.

3. Differences Among Disability Groups

An important finding is that counseling varied in effectiveness by disability group. From a statistical viewpoint, the results might have been more decisively positive if the sample had been composed only of the Emotionally Disturbed, Severe, since it is in this disability group that there is the greatest difference between the experimental and control clients. Nevertheless, there are indications from the analysis of the counseling process that follow-up counseling did play a role in maintaining employment in other disability groups, although the nature of the counseling varied in intensity, focus and length. We have earlier pointed to the fact that the mentally retarded and physically disabled clients appeared more in need of initial and continued job counseling and placement service, than the more elaborate services implied by the term counseling. The same seems to be true of the disabled aged who, although small in number in the sample, require some additional discussion at this point.

Since there were only 39 Experimental and 35 Control clients over 55 years of age, this group was too small to be treated separately in the quantitative analysis. The general findings indicated that, on the whole, the older the client the less favorable the vocational outcome. Nevertheless, the older clients in the Experimental group did relatively better than the older clients in the Control group, suggesting that clients in this age group also benefited from the counseling program.

Since the majority of clients over 55 were physically disabled, conclusions drawn in regard to the Physically Disabled would therefore apply to this group as well. In the evaluation conference, counselors agreed that the services which older clients with a physical disability appeared to need were job development and job placement. Most often, employment was not maintained because of health factors, rather than because of job adjustment problems. This was also noted in the sub-sample studied for the details of the counseling process, where the main problem was securing employment within the physical capacity of clients and making re-placements when there was a change in health status that demanded job change. Counseling around personal problems and job adjustment was least frequent in this disability category. The findings of the Milwaukee, Philadelphia and New York studies (15, 8, 14) are substantially similar, indicating that the needs of the older physically disabled population can be met by concentration on placement and on availability of the counselor for re-placement, to meet the changing health requirements of individual clients.

4. Early Placement

An important finding of the study is that job placement immediately after completing workshop service is a powerful determiner of vocational outcome.

The sample as a whole had not been employed for 12 to 15 months prior to referral for rehabilitation service at the JVS's. In addition, there was a substantial number with no or very little work experience. Workshop training, therefore, meant a change from an undirected existence to a climate of training and preparation for employment, and any interruption or lengthy period of time without employment could easily break down the patterns built up during the training period. Counselors reported that, at the beginning of the project, when seeking out clients who had been out of the workshop for some time, they had found some simply "sitting at home." Having been unsuccessful in the initial placement or in securing employment, they apparently had insufficient ego-strength to take further steps on their own to seek work or even to return to the agency.

In analyzing individual cases it was found, particularly among the younger clients, that there was much apprehension about seeking employment and knowing how to talk with an employer. Where placement was not made soon after the end of training, this apprehension tended to increase, and made adjustment more difficult. Since the whole approach of workshop training is toward job placement, starting this process without any lapse of time would appear to be a natural next step in the training program. There has been a strong tendency among the JVS agencies to incorporate placement functions within the workshop, either as an extension of the counselor's activity with the client, or by adding a placement counselor to the workshop staff, to work directly with the client towards job placement while he is still in training.

In the Evaluation Conference (see Chapter V), counselors ageeed on the importance of continuity of service, with job placement and job counseling as the final phase of workshop training. Placing a client while he is still in the workshop has the added advantage of serving as a trial placement, which, if unsuccessful, permits a continuation of training until the next referral and a gradual lessening of counselor intervention as the client adjusts to working. Moderate doses of reinforcement during this transitional period, when success in the workshop is still fresh, appears to have greater sustaining power than later on, when clients may already have experienced failure.

SUBSIDIARY FINDINGS

So far, we have commented on certain of those study findings which are supported by significant statistical differences between experimentals and controls. During the course of the investigation, however, precautions were taken to secure maximal feedback from counselors as to their detailed experiences with their clients. The ensuing material has generated a number of important qualitative impressions which should have the status of subsidiary, if not thoroughly established, findings. The following are the most important of these clinical judgments.

1. The Role of the Family Member

Observations made from the analysis of case records suggests that the family is an important component in the ultimate adjustment of the vocationally disabled client. In cases of younger mentally retarded and emotionally disturbed clients, where the parent was positive and reinforced the counselor's planning, it was found that successful placement could be effected and maintained. Conversely where a parent was overprotective and interfered with a placement because it was not "right" for his child, the client had difficulty in adjusting to any job. It was also noted that where there was continual bickering between the parents, there was an adverse effect upon a young client, as well as upon the spouse who was a client.

Although the study was not focused on this aspect of counseling, there appears to be evidence from the records of individual clients to suggest that parents of young clients should be involved in the counseling process; also, the spouse of a married client should be seen in the early stages of counseling in those situations where there has been prolonged unemployment, or where there is any indication of a marital problem.

Another type of situation which suggests the need for involvement of a supportive family member is the severely emotionally disturbed client, who is in process of leaving the hospital. From observations based on individual records and from counselors' reports, such clients appear to need a supportive figure (either a member of the family or some substitute person other than the counselor) to supervise living and medical arrangements, help the client meet other problems arising in everyday living, and provide some emotional support. The records indicate that where there was no family member to take on this role, but an arrangement was made for a contact person either in a halfway house or a family boarding home, that the individual was better able to adjust to the community and to a job. The importance of such a supportive community figure is noted by Dean and Brooks in their five-year study of chronic schizophrenic patients (3). The study by Goertzel, Hiroto, Grumer and Moes (6) also stresses the prior need to integrate the patient into the community before vocational adjustment can be effected.

2. The Role of the Employer

One of the most significant aspects of the program was the involvement of the employer beyond the initial placement of the client on the job. From the very beginning of the program, counselors recognizing that the program allowed them the opportunity to individualize placement service concentrated on sensitizing employers to the nature of the clients' problems and working with them closely over a period of time. This ongoing type of relationship between counselor and individual employers made it possible to anticipate problems before they became serious and, in some instances, prevented clients from impulsively walking off their jobs. It was noted by counselors that employers frequently took the initiative in alerting them to problems which were developing. In some situations, counselors were allowed to spend part of the first work-day in interpreting instructions to the client (which was particularly effective with young retardates); employers were also helpful in orienting supervisors and co-workers to the new employee. This close ongoing cooperative relationship was an important component in effecting stable employment for the severely disabled individual.

3. The Counseling Process

From the analysis of the nature of the counseling process (Chapter IV), certain patterns appear in regard to the problems presented by clients, the critical points at which these occurred, and the type of services needed to assist clients in achieving job stability. It is recognized that not every client will have the same problems or require intensive follow-up and that each client must be individually evaluated. Nevertheless, the analysis which follows may serve as a general guide in working with a group of clients having disabilities similar to those in this study.

Finding the Job. This was a problem of major concern to clients who were not already working at the time of follow-up and was also expressed by a number of clients who were working, but who were either dissatisfied or insecure and wished to make a job change. Many of the clients were fearful of going to work, were very dependent on the counselor, and were able to do little on their own in seeking employment. They therefore required considerable support, encouragement and preparation for job seeking.

This initial period of preparation for job placement was described by counselors as the first critical period in eventual job adjustment. It often involved (particularly for the retarded and the younger emotionally disturbed clients) learning how to dress properly for an interview, how to travel, how to talk with an employer, how to act on the job. (This type of preparation was often begun while the client was still in the workshop.)

Techniques utilized by the counselors were role playing, psychodrama, filling out applications, accompanying clients to interviews, and supporting and encouraging clients in individual interviews, supplemented by group counseling in agencies where this was available.

Intensive employer preparation took place through pre-placement visits to employers to describe the client and to pave the way for his acceptance on the job. After placements, continuing contacts were made with the employer. Such visits were designed to interest the employer in the client to be placed, to determine the actual job to be performed so that the work tasks could be described to the client, and to ensure that the client was physically and mentally able to perform the particular assignment. In some instances, it was possible to have the employer re-engineer the job to some degree, so that it fell within the capabilities of the client.

Maintenance of Employment. Once a placement was made, counselors identified two critical periods: the first day on the job, when it was important to be available in the event that the client met with a problem, and the first month on the job, when the client was adjusting to his role of worker and might need help in regard to job performance or in his relationships with others in the work environment.

The analysis indicates that the two major problems around the job itself were: "difficulty in meeting work requirements," and "finding the job too difficult." These difficulties seemed more due to a lack of understanding on how to perform a task than mere inability to perform; for some clients (particularly the mentally retarded) this required a visit by the counselor to the work site, in order to discuss the problem with the employer and the client. Sometimes help was given to a client in actually performing on the job. In some instances, the problem seemed due to the client's uncertainty and lack of self confidence, and required support and encouragement from both the counselor and the employer.

Difficulties in relationships with the supervisor and with co-workers were also prominent, because many clients did not have sufficient experience to know how to relate to authority figures and to other workers, and others had personality problems which carried over into any relationship. Clients with these problems needed the counselors' help in learning how to talk to their supervisors and co-workers, in learning how to carry out directions, and in learning how to control impulsive behavior.

During this adjustment period, counselors kept in touch with employers to enlist their help in working out problems. It was also found that employers frequently alerted the counselors that such problems were developing, thus giving the counselors the opportunity to work through problems before they became too serious and caused loss of employment. Much of the counseling during this period was focused on helping the client control impulsive behavior, role-playing to demonstrate how to act with the supervisor and other co-workers, and encouragement of clients to talk over any real problems around job performance with their immediate supervisor.

Other Problems Affecting Job Adjustment. A large number of problems brought up by clients were not connected with the job itself but required some counselor action since they impinged on adjustment to the job. The majority of these problems were in regard to health and emotional well-being, family adjustment, social outlets, and recreation. To a lesser degree, mainly with the severely emotionally disturbed, there were concerns about housing and finances.

When clients were active with other agencies or resources, counselors communicated such information and encouraged clients to return for further help. Where there was no ongoing contact, counselors were active in working out referrals to an appropriate resource. There were also instances where there was no one else to take responsibility and counselors were involved in referring clients to physicians, securing legal counseling, making arrangements to obtain needed medication, helping the client obtain housing, discussing budgeting, etc.

The high number of concerns around family difficulties also meant the need for contacts with parents and spouses and, in those instances where the problem could not be resolved, to arrange for marital or family counseling.

In the cases of the severely emotionally disturbed who had recently left a hospital, there was frequently the need to work out living arrangements and arrange for medication and follow-up therapy. Problems in regard to socialization and recreation were also voiced by some in this disability group and were sometimes difficult to meet because of lack of community resources. Many of the mentally retarded were active in an agency which had an Employment Club for all graduates of its workshop and found an outlet through this program. But, in other communities, such programs were not available.

The fourth critical point in the client's vocational adjustment was that in which the client is seeking promotion either through a wage increase, a change of job, or further training. Clients manifested such problems as feelings of general dissatisfaction, wanting more money, wanting to do different kind of work, a desire to get more training or to go to school. Since this occurred at different times for each client, it was necessary for counselors to be alert to these desires before they became problems or before the client left a job without making a sound plan. Counseling at this point concentrated in helping a client work through a plan which was feasible in terms of individual capabilities. For some clients, it meant lowering their aspirations. For others, it meant finding a new job before leaving the old. For some clients, a training or educational program had to be developed, which could be carried out either while working or on a full-time basis. Although counselors were active in job placement throughout the program, clients were encouraged to seek jobs on their own and to make their own inquiries regarding training or schooling. The emphasis in this phase was on encouraging the client to help himself and move toward independence.

The final period, which differed for each client, but, for many took place within the first six months, was marked by a tapering off of contacts for clients who showed signs of being able to meet their own problems. Some clients requested that contacts be discontinued, since they felt capable of carrying on by themselves. This feeling of independence was encouraged, although clients were made aware they could return for further service.

All clients continued to receive service for the duration of the program, if this were needed. For some, this meant continuing follow-up for periods varying from 1 year to 2-1/2 years (depending on when they were accepted for service). Such clients either had a deep seated personality problem which prevented adjustment, or a multiplicity of problems with which they could not cope, and it was usually apparent by the end of the first year that the chances of vocational adjustment were poor.

Counselors recognized that setting a time limit was an effective technique in mobilizing both client and counselor and felt that for most clients a six-month period of follow-up was sufficient. However, to provide for those individuals whose problems required a longer period, or whose progress was interrupted by a period of hospitalization, or return to the workshop, it was suggested that follow-up service should be available for a year, with an evaluation to be made at the end of six months to determine whether an individual client needed continuing service.

4. The Role of the Counselor

Any consideration of the general applicability of the results of this program must take into account the type of staff which was utilized. It had been anticipated that the problems presented by a severely disabled population would require knowledgeable, resourceful counselors with experience in working with disabled clients. The proposal therefore stipulated that only counselors with this type of experience were to be employed.

From the analysis of the counseling records, it is apparent that the range of problems presented by clients was extensive and that there was a high degree of dependence on the counselor. It was therefore essential for counselors to be able to diagnose the needs and problems of each client, to be able to differentiate as to the type of service required, to use appropriate counseling techniques, to be knowledgeable in regard to job counseling and placement, to be familiar with community resources, and to be resourceful in securing needed services for clients. In effect therefore, the counselors in this program combined the functions of case manager, placement counselor, career counselor and rehabilitation counselor. Whether similar results would have been achieved, or could be achieved, by less experienced counselors, would require another study to demonstrate.

5. Comprehensive Services in a Vocational Adjustment Program.

In working with severely disabled persons, vocational adjustment cannot be considered apart from the individual's general adjustment. Therefore, in addition to focusing on problems centering around adjustment to the job itself, it is essential to provide for those problems arising from personal-social, medical and psychological needs.

Counselors agreed that the minimum services which should be provided by a rehabilitation facility working with a severely disabled population should include workshop evaluation and adjustment training, individual counseling, job placement and development. It was also felt that group counseling added an important dimension of service, particularly for mentally retarded and emotionally disturbed clients and that remedial reading was a desirable ancillary service for a population which is largely semi-literate.

There was agreement that within each community there must also be provision for casework, psychiatric and medical services to meet individual client needs. In working with their clients, counselors had extensive contact with community agencies, hospitals, the State Employment Service, the State Rehabilitation Agency. They differed, however, as to the extent of their involvement in working out individual arrangements to secure medication, psychiatric care, housing recreational programs, etc. Where facilities were lacking or not coordinated, counselors took the initiative in trying to make individual arrangements for clients. In other communities counselors had access to an existing network of services, with which they had good communication for referral and ongoing communication. Some counselors felt that in communities where services were lacking or were not adequately coordinated that it might have been more efficient to have a social worker on the workshop staff with the responsibility for making plans to provide for client personal, medical and social needs which might interfere with vocational adjustment.

CHIEF CONCLUSIONS

1. A continued counseling process after completion of work adjustment training adds significantly to the ability of handicapped clients to secure and maintain employment.

2. Within the gross disability classifications of the project, the clients who appeared to benefit most from follow-up counseling were the severely emotionally disturbed. These clients appear to require intensive counseling to help them with the emotional components of job and personal adjustment. It would appear that the mentally retarded, the physically disabled and the disabled-aged chiefly need continued service with greater emphasis on job counseling and placement components, as compared to the broader problems that are dealt with in counseling the emotionally disturbed.

3. Of the demographic variables studied, sex (males performed somewhat better than females on certain outcome criteria) and age (generally the older the client, the less favorable the outcome) are significantly related to successful maintenance of employment; whereas the others appear to play little role.

4. Initial counselor estimates of the client's general health and his motivation for work appear to account for some of the variance in outcome. Those who are healthier and better motivated profit more from follow-up counseling. Other counselor estimates (potential placeability, potential maintenance of employment) are not predictive variables for later outcomes.

5. Follow-up counseling is significantly more effective with clients placed early after completing workshop training than clients placed later. It appears that a job-placement process begun while the client is still in the workshop, as the final phase of the work adjustment program, provides continuity

of service which enhances the possibility of successful placement, and reduces the need for later intervention. Conversely, a delay in placement permits the dissipation of workshop gains and increases the need for later counselor intervention.

SUBSIDIARY CONCLUSIONS

1. An important ingredient in successful job placement of the vocationally handicapped is the development of relationships with individual employers to sensitize and involve them in meeting client problems.

2. Establishing and utilizing a network of supportive services, to provide for the personal-social needs of clients, particularly the emotionally disturbed, is an essential component of vocational adjustment.

3. The positive support of a family member can aid in the adjustment of the vocationally handicapped client. Conversely, the interference or negative attitude of a family member can contribute to the maladjustment of the vocationally handicapped client.

4. Timely counselor intervention during the period of preparation for employment, the first day on the job, the first month on the job, and at a time when the client seems ready for a change, may be critical in adjustment.

5. It seems likely that the kind of continued rehabilitation service described in this study requires the services of rather highly experienced vocational counselors.

BIBLIOGRAPHY

1. Arkansas Rehabilitation Service, Research and Demonstration Section. Intensive Follow-up Services for Marginal Workers. Arkansas Rehabilitation Service. Progress Report, February 1968.
2. Bailey, John. A Survey of Rehabilitation Follow-up Studies. Pennsylvania Bureau of Vocational Research, Research Unit. May 1965.
3. Deane, William N. and Brooks, George W. Five Year Follow-up of Chronic Hospitalized Patients. Vermont State Hospital, Waterbury, Vermont, September 1967.
4. Forthman, Robert C. Psychiatric Follow-up Study. Department of Rehabilitation, State of California. Interim Report, February 1967.
5. Gellman, W., Gendel, H., Glaser, N., Friedman, S., Neff, W. Adjusting People to Work, The Operations and Results of the Vocational Adjustment Center. Jewish Vocational Service, Chicago, June 1957.
6. Goertzel, V., Hiroto, D., Grumer, M., Moes, J. H. Coordinating Hospital and Community Work Adjustment Services, Final Report of a Joint Study by Camarillo State Hospital and Jewish Vocational Service, Los Angeles, January 1967.
7. Industrial Relations Center, University of Minnesota. Minnesota Studies in Vocational Rehabilitation: A Follow-up Study of Placement Success. Industrial Relations Center, University of Minnesota, Minneapolis, Bulletin 23, August 1958.
8. Jewish Employment and Vocational Service of Philadelphia. A Work Adjustment Center for Older Disabled Workers. Final Report, February 1967.
9. Meadow, Lloyd and Tillem, Kalman. Evaluating the Effectiveness of a Workshop Rehabilitation Program, Personnel Guidance Journal, 1963, 41, 541-546.
10. Neff, Walter. The Success of a Rehabilitation Program: A Follow-up Study of Clients of the Vocational Adjustment Center. Monograph #3. Jewish Vocational Service, Chicago, 1959.
11. Project Report of the Employment Adjustment Center for the Emotionally Disturbed, Final Report December 1960, Jewish Vocational Service, Milwaukee.
12. Report of Services to Individual Clients Under the Research Grants Program: Fiscal Year 1964, Department of Health, Education and Welfare.
13. Rusalem, H., Baxt, R., Barshop, I. The Vocational Rehabilitation of Older Handicapped Workers: Demonstration of Feasibility of Vocational Rehabilitation for Vocationally Handicapped Persons 60 Years of Age and Over. Final Report June 1963. Federation Employment and Guidance Service, New York.
14. Rusalem, H., Baxt, R., Barshop, I. Rehabilitating the Older Disabled Worker. Federation Employment and Guidance Service, New York. Final Report. Vol. I, 1967.
15. Vocational Rehabilitation of Older Handicapped Persons, Jewish Vocational Service, Milwaukee, Final Report, March 1964.
16. Walker, R. and McCourt, J. Employment Experience Among 200 Schizophrenic Patients In Hospital and After Discharge. American Journal of Psychiatry, 1965, 122, 316-319.

Appendix I.

Statistical Tables

TABLE A

SCORING OF VARIABLES

Variable	Description	Score	
(1)	Group	0	Comparison
		1	Experimental
(2)	Sex	0	Male
		1	Female
(3)	Age	No. to nearest birthday (2 digits)	
(4)	Marital	0	Single
		1	Married and other
(5)	Education	0	Ungraded
		1	1-4
		2	5-7
		3	Completed primary
		4	9
		5	10
		6	11
		7	12
		8	Some college
		(Where not known--use mean)	
(6)	Years since school	Use actual number	
(7)	Years available in labor force	Use actual number	
(8)	Years employed	Use actual number (% of years in labor force)	
(9)	Months of current unemployment	0	Out of labor force
		1	In labor force
(10)	No. of months of current unemployment	0	1- 3
		1	4- 6
		2	7- 9
		3	10-12
		4	13-15 (Mean)
		5	16-18
		6	19-22
		7	23-24
		8	Over 24
		(Not in labor force--assign to mean)	

TABLE A - Page 2

Variable	Description	Score		
(11)	No. of jobs held during 24 mos. prior to referral to JVS	0	None	
		1	1	
		2	2	(Mean)
		3	3	
		4	4	
		5	5	
		6	6	
		7	7+	
		(Not in labor force--assign to mean)		
(12)	Since client has left workshop	0	Not employed	
		1	Employed	
(13)	At time of continuation client was	0	Not employed	
		1	Employed	
(14) (15) (16)	Major disability Ref.	000	MR	
	(14)	100	EDM	
	(15)	010	EDS	
	(16)	001	PD	
(17)	Multi-disability	0	Single	
		1	Multi-disabled	
(18)	State of general health	4	Generally adequate	
		3	Mildly impaired	
		2	Moderately impaired	
		1	Severely impaired	
		N/A	Given to mean	
(19)	Client's general social adjustment outside of specific empl. status	4	Generally adequate	
		3	Mildly impaired	
		2	Moderately impaired	
		1	Severely impaired	
		N/A	Given to mean	
(20)	Over-all estimate of motivation for work	4	Strongly motivated	
		3	Somewhat ambivalent	
		2	Considerable ambivalence	
		1	Unmotivated	
		N/A	Given to mean	
(21)	Realism of vocational aspirations	4	Quite realistic	
		3	Mildly unrealistic	
		2	Moderately unrealistic	
		1	Unrealistic	
		N/A	Given to mean	

TABLE A - Page 3

Variable	Description		Score	
(22)	Estimate of client's placeability		4	Easily placeable
			3	Moderately difficult to place
			2	Very difficult to place
			1	Unplaceable
			N/A	Given to mean
(23)	Estimate after workshop of client ability to maintain employment		4	75-100
			3	50- 74
			2	25- 49
			1	0- 24
			N/A	Given to mean
(24)	1st follow-up		0	Never worked
			1	Worked
(25)	2nd follow-up		0	Never worked
			1	Worked
(26)	12 mos. follow-up		0	Never worked
			1	Worked
(27)	1st follow-up % worked of available time		0	Never worked
				to
			99%	
(28)	2nd follow-up % worked of available time		0	Never worked
				to
			99%	
(29)	12 mos. follow-up % worked of available time		0	Never worked
				to
			99%	
(30)	1st follow-up Worked at follow-up		0	No
			1	Yes
(31)	2nd follow-up Worked at follow-up		0	No
			1	Yes
(32) to (40)	Milwaukee	Ref.	000000000	
	Boston	(32)	100000000	
	Chicago	(33)	010000000	
	Detroit	(34)	001000000	
	Kansas City	(35)	000100000	
	Los Angeles	(36)	000010000	
	New York (Fegs)	(37)	000001000	
	Newark	(38)	000000100	
	Philadelphia	(39)	000000010	
	St. Louis	(40)	000000001	

TABLE B

SELECTED DATA, IN TABULAR FORM

	Total Sample (N = 523)	Experimentals (N = 307)	Controls (N = 216)
(1) Proportions by Sex:			
Males	60.8%	59.0%	63.0%
Females	39.2%	41.0%	37.0%
(2) Age (Years):			
Mean	34.6	33.7	35.8
SD	15.2	14.6	16.7
(3) Marital Status:			
Single	65.0%	64.2%	66.2%
Married and other	35.0%	35.8%	33.8%
(4) Education (In years):			
Mean	9.0	9.0	9.0
SD	2.7	2.7	2.7
(5) Labor Force Status:			
In labor force	72.3%	69.1%	76.8%
Out of labor force	27.7%	30.9%	23.2%
(6) Months Current Unemployment:			
Median	13-15	13-15	13-15
Sigma	7- 9	7- 9	7- 9

TABLE B - Page 2

	Total Sample (N = 523)	Experimentals (N = 307)	Controls (N = 216)
(7) Employment Since Workshop:			
No employment	39.2%	37.5%	41.7%
Employment	60.8%	62.5%	58.3%
(8) Employed at Continuation:			
No	50.3%	50.2%	50.5%
Yes	49.7%	49.8%	49.5%
(9) Proportion Multiply Disabled	31.4%	34.9%	26.5%
(10) Disability Groups:	%	%	%
MR	21	19	23
EDM	18	20	16
EDS	33	34	31
PD	28	27	30
(11) State of General Health:	%	%	%
Severely impaired	4	6	1
Moderately impaired	13	14	15
Mildly impaired	25	24	25
Generally adequate	58	56	59
(12) Motivation for Work	%	%	%
Unmotivated	1	2	1
Considerable ambivalence	16	14	18
Somewhat ambivalent	36	38	32
Strongly motivated	47	46	49

TABLE B - Page 3

	Total Sample (N = 523)	Experimentals (N = 307)	Controls (N = 216)
(13) Estimate of Client's Placeability:	%	%	%
Unplaceable	3	3	4
Very difficult to place	33	37	26
Moderately difficult to place	48	47	50
Easily placeable	16	13	20
(14) Estimate of Employment Maintenance:	%	%	%
0- 24	8	7	9
25- 49	18	21	14
50- 74	37	41	32
75-100	37	31	45
(15) Proportions in Employment During 12 Month Follow-up:	%	%	%
No employment	18	13	26
Employment	82	87	74
(16) Percentage of Time Worked During 12 Month Follow-up:	%	%	%
0- 24	24	19	24
25- 49	8	7	8
50- 74	13	11	13
75-100	55	63	55
(17) Working at End of 12 Month Follow-up:	%	%	%
Not working	38	33	45
Working	62	67	55

TABLE C-CASELOAD BY SEX, BY GROUP, BY AGENCY OF SOURCE 1)

(N - 523)

Agency	E = EXPERIMENTAL			C = CONTROL			TOTAL CASELOAD N = 523		
	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL	MALE	FEMALE	TOTAL
1	(12) 4.	(11) 4.	(23) 7.	(6) 3.	(7) 3.	(13) 6.	(18) 3.	(18) 3.	(36) 7.
2	(25) 8.	(16) 5.	(41) 13.	(19) 9.	(11) 5.	(30) 14.	(44) 8.	(27) 5.	(71) 14.
3	(9) 3.	(10) 3.	(19) 6.	(12) 6.	(2) 1.	(14) 6.	(21) 4.	(12) 2.	(33) 6.
4	(7) 2.	(12) 4.	(19) 6.	(7) 3.	(6) 3.	(13) 6.	(14) 3.	(18) 3.	(32) 6.
5	(20) 7.	(10) 3.	(30) 10.	(17) 8.	(10) 5.	(27) 13.	(37) 7.	(20) 4.	(57) 11.
6	(26) 8.	(13) 4.	(39) 13.	(13) 6.	(8) 4.	(21) 10.	(39) 7.	(21) 4.	(60) 11.
7	(23) 7.	(11) 4.	(34) 4.	(15) 7.	(10) 5.	(25) 12.	(38) 7.	(21) 4.	(59) 11.
8	(16) 5.	(12) 4.	(28) 9.	(10) 5.	(5) 2.	(15) 7.	(26) 5.	(17) 3.	(43) 8.
9	(24) 8.	(18) 6.	(42) 14.	(27) 13.	(11) 5.	(38) 18.	(51) 10.	(29) 6.	(80) 15.
10	(19) 6.	(13) 4.	(32) 10.	(11) 5.	(9) 4.	(20) 9.	(30) 6.	(22) 4.	(52) 10.
Total	(181) 59.	(126) 41.	(307) 100.	(137) 63.	(79) 37.	(216) 100.	(318) 61.	(205) 39.	(523) 100.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE D
PROPORTION OF TOTAL SAMPLE BY AGE, BY GROUP, AND BY AGENCY OF SOURCE [1]
(N - 523)

	1		2		3		4		5		6		7		8		9		10		TOTALS		TOTAL CASELOAD (N = 523)
AGE IN YEARS	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
17 – 19	(5) 22	(2) 15.	(19) 46.	(12) 40.	(4) 21.	(3) 21.	(2) 11.	(1) 8.	(5) 17.	(2) 7.	(6) 15.	(1) 5.	–	–	(5) 18.	(4) 27.	(11) 26.	(11) 29.	(6) 19.	(4) 20.	(63) 21.	(40) 19,	(103) 20.
20 – 24	(5) 22.	(2) 15.	(6) 15.	(5) 17.	(4) 21.	(3) 21.	(1) 5.	(1) 8.	(13) 43.	(5) 19.	(9) 23.	(5) 24.	–	–	(9) 32.	(2) 13.	(4) 10.	(10) 26.	(8) 25.	(3) 15.	(59) 19.	(36) 17.	(95) 18.
25 – 34	(7) 30.	(2) 15.	(5) 12.	(4) 13.	(6) 32.	(4) 29.	(1) 5.	–	(5) 17.	(7) 26.	(8) 21.	(3) 14.	–	–	(8) 29.	(4) 27.	(10) 24.	(7) 18.	(6) 19.	(7) 35.	(56) 18.	(38) 18.	(94) 18.
35 – 44	(3) 13.	(4) 31.	(7) 17.	(8) 27.	(5) 26.	(2) 14.	(4) 21.	–	(4) 13.	(6) 22.	(6) 15.	(5) 24.	–	–	(5) 18.	(3) 20.	(13) 31.	(5) 13.	(6) 19.	(2) 10.	(53) 17.	(35) 16.	(88) 17.
45 – 54	(3) 13.	(1) 8.	(3) 7.	(1) 3.	–	(2) 14.	(8) 42.	(10) 77.	(2) 7.	(4) 15.	(8) 21.	(5) 24.	(3) 9.	(1) 4.	(1) 4.	(2) 13.	(4) 10.	(3) 8.	(5) 16.	(3) 15.	(37) 12.	(32) 15.	(69) 13.
55 – 64	–	–	(1) 2.	–	–	–	(3) 16.	(1) 8.	(1) 3.	(3) 11.	(2) 5.	(1) 5.	(26) 76.	(16) 64.	–	–	–	(2) 5.	(1) 3.	(1) 5.	(34) 11.	(24) 11.	(58) 11.
65+	–	(2) 15.	–	–	–	–	–	–	–	–	–	(1) 5.	(5) 15.	(8) 32.	–	–	–	–	–	–	(5) 2.	(11) 5.	(16) 3.

[1] Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE E
MARITAL STATUS BY GROUP, AND BY AGENCY OF SOURCE 1)
(N = 523)

AGENCY	SINGLE		MARRIED & OTHER		TOTALS BY GROUP	
	E	C	E	C	E	C
1	(18) 78.	(10) 77.	(5) 22.	(3) 23.	(23) 7.	(13) 6.
2	(31) 76.	(27) 90.	(10) 24.	(3) 10.	(41) 15.	(30) 14.
3	(18) 95.	(10) 71.	(1) 5.	(4) 29.	(19) 6.	(14) 6.
4	(6) 32.	(7) 54.	(13) 68.	(6) 46.	(19) 6.	(13) 6.
5	(24) 80.	(16) 59.	(6) 20.	(11) 41.	(30) 10.	(27) 13.
6	(29) 74.	(14) 67.	(10) 26.	(7) 33.	(39) 12.	(21) 9.
7	(–) –	(4) 16.	(34) 100.	(21) 81.	(34) 11.	(25) 11.
8	(26) 93.	(14) 93.	(2) 7.	(1) 7.	(28) 9.	(15) 7.
9	(29) 69.	(29) 76.	(13) 31.	(9) 24.	(42) 15.	(38) 18.
10	(16) 50.	(12) 60.	(16) 50.	(8) 40.	(32) 10.	(20) 9.
Sub-totals by Group	(197) 38.	(143) 27.	(110) 21.	(73) 14.	(307) 59.	(216) 41.
Totals	(340) 65.		(183) 35.		(523) 100.	

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE F
EDUCATION BY GROUP, AND BY AGENCY OF SOURCE 1)
(N= 523)

SCHOOL GRADE	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD (N = 523)
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Ungraded	(5) 22.	(5) 38.	(20) 49.	(15) 50.	(8) 42.	(4) 29.	(–) –	(–) –	(–) –	(–) –	(–) –	(2) 10.	(1) 3.	(–) –	(3) 11.	(2) 13.	(5) 12.	(2) 5.	(5) 16.	(2) 10.	(47) 15.	(32) 15.	(79) 15.
1–4	(–) –	(–) –	(–) –	(1) 3.	(–) –	(–) –	(–) –	(–) –	(–) –	(1) 4.	(1) 3.	(1) 5.	(1) 3.	(1) 4.	(–) –	(–) –	(1) 2.	(2) 5.	(–) –	(–) –	(3) 1.	(6) 3.	(9) 2.
5–7	(1) 4.	(1) 8.	(–) –	(1) 3.	(–) –	(–) –	(2) 11.	(2) 15.	(3) 10.	(1) 4.	(3) 8.	(4) 19.	(6) 18.	(3) 12.	(1) 4.	(1) 7.	(8) 19.	(4) 11.	(4) 13.	(–) –	(28) 9.	(17) 8.	(45) 9.
Completed Primary	(–) –	(1) 8.	(5) 12.	(2) 7.	(2) 11.	(1) 7.	(4) 21.	(4) 31.	(–) –	(–) –	(5) 13.	(3) 14.	(12) 35.	(7) 28.	(1) 4.	(1) 7.	(5) 12.	(4) 11.	(6) 19.	(6) 30.	(40) 13.	(29) 13.	(69) 13.
9	(1) 4.	(1) 8.	(–) –	(–) –	(2) 11.	(1) 7.	(2) 11.	(1) 8.	(2) 7.	(2) 7.	(3) 8.	(1) 5.	(1) 3.	(2) 8.	(4) 14.	(1) 7.	(4) 10.	(3) 8.	(1) 3.	(1) 5.	(20) 7,	(13) 6.	(33) 6.
10	(2) 9.	(1) 8.	(5) 12.	(6) 20.	(1) 5.	(1) 7.	(3) 16.	(2) 15.	(1) 3.	(2) 7.	(2) 5.	(3) 14.	(3) 9.	(5) 20.	(2) 7.	(1) 7.	(8) 19.	(8) 21.	(6) 19.	(2) 10.	(33) 11.	(31) 14.	(64) 12.
11	(–) –	(–) –	(5) 12.	(1) 3.	(–) –	(1) 7.	(–) –	(–) –	(1) 3.	(1) 4.	(5) 13.	(–) –	(1) 3.	(2) 8.	(3) 11.	(2) 13.	(5) 12.	(4) 11.	(2) 6.	(1) 5.	(22) 7.	(12) 6.	(34) 7.
12	(8) 35.	(2) 15.	(5) 12.	(4) 13.	(5) 26.	(5) 36.	(3) 16.	(1) 8.	(18) 60.	(12) 44.	(16) 41.	(3) 14.	(5) 15.	(4) 16.	(12) 43.	(6) 40.	(5) 12.	(10) 26.	(6) 19.	(5) 25.	(83) 27.	(52) 24.	(135) 26.
Some College	(6) 26.	(2) 15.	(1) 2.	(–) –	(1) 5.	(1) 7.	(5) 26.	(3) 23.	(5) 17.	(8) 30.	(4) 10.	(4) 19,	(4) 12.	(1) 4.	(2) 7.	(1) 7.	(1) 2.	(1) 3.	(2) 6.	(3) 15.	(31) 10.	(24) 11.	(55) 11.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE G
YEARS SINCE SCHOOL & JVS REFERRAL BY GROUP, AND BY AGENCY OF SOURCE 1)
(N = 523)

	1		2		3		4		5		6		7		8		9		10		TOTAL BY GROUP		TOTAL CASELOAD- (N = 523)
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
0 – 3	(7) 30.	(2) 15.	(23) 56	(14) 47.	(9) 47.	(3) 21.	(3) 16.	(2) 15.	(10) 33	(7) 26	(13) 33.	(6) 29.	(–) –	(–) –	(12) 43.	(4) 27	(12) 29	(18) 47	(10) 31.	(6) 30.	(99) 32.	(62) 29.	(161) 31.
4 – 7	(5) 22.	(2) 15	(2) 5.	(5) 17.	(2) 11.	(2) 14.	(–) –	(–) –	(11) 37.	(2) 7.	(2) 5.	(2) 10.	(–) –	(–) –	(7) 25.	(2) 13	(2) 5.	(5) 13	(4) 13	(2) 10.	(35) 11.	(22) 10.	(57) 11.
8 – 11	(4) 17.	(1) 8.	(2) 5.	(1) 3.	(1) 5.	(2) 14.	(1) 5.	(–) –	(2) 7.	(–) –	(5) 13.	(1) 5.	(1) 3.	(–) –	(1) 4.	(3) 20.	(4) 10.	(4) 11.	(3) 9.	(5) 25.	(24) 8.	(17) 8.	(41) 8
12 – 15	(–) –	(3) 23.	(2) 5.	(–) –	(–) –	(3) 21.	(–) –	(–) –	(–) –	(4) 15.	(5) 13.	(3) 14.	(–) –	(–) –	(1) 4.	(1) 7.	(4) 10.	(2) 5.	(4) 13.	(1) 5.	(16) 5.	(17) 8.	(33) 6
16 – 19	(3) 13.	(–) –	(2) 5.	(1) 3.	(5) 26.	(2) 14.	(1) 5.	(–) –	(–) –	(2) 7.	(3) 8.	(1) 5.	(–) –	(–) –	(2) 7.	(–) –	(2) 5.	(1) 3.	(1) 3.	(1) 5.	(19) 6.	(8) 4.	(27) 5.
20+	(4) 17.	(5) 38.	(10) 24.	(9) 30.	(2) 11.	(2) 14	(14) 74.	(11) 85.	(7) 23.	(12) 44.	(11) 28.	(8) 38.	(33) 97.	(25) 100.	(5) 18.	(5) 33.	(18) 43.	(8) 21.	(10) 31.	(5) 25.	(114) 37.	(90) 42.	(204) 39.

---

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE H
YEARS AVAILABLE FOR LABOR FORCE PRIOR TO J V S REFERRAL BY GROUP, BY AGENCY OF SOURCE [1)]

(N = 523)

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
0	(6) 26.	(2) 15.	(9) 22.	(5) 17.	(9) 47.	(3) 21.	(2) 11.	(2) 15.	(5) 17.	(–) –	(4) 10.	(4) 19.	(1) 3.	(1) 4.	(8) 29.	(4) 27.	(15) 36.	(10) 26.	(5) 16.	(2) 10.	(64) 21.	(33) 14.	(97) 19.
1 – 5	(11) 48.	(4) 31.	(20) 49.	(14) 47.	(7) 37.	(4) 29.	(7) 37.	(1) 8.	(18) 60.	(11) 41.	(12) 31.	(7) 33.	(4) 12.	(–) –	(11) 39.	(3) 20.	(10) 24.	(14) 37.	(14) 44.	(6) 30.	(114) 37.	(64) 30.	(178) 34.
6 – 10	(1) 4.	(3) 23.	(2) 5.	(4) 13.	(–) –	(1) 7.	(2) 11.	(–) –	(3) 10.	(5) 19.	(8) 21.	(4) 19.	(1) 3.	(2) 8.	(4) 14.	(3) 20.	(5) 12.	(6) 16.	(1) 3.	(4) 20.	(27) 9.	(32) 15.	(59) 11.
11 – 20	(4) 17.	(2) 15.	(5) 12.	(3) 10.	(4) 11.	(5) 36.	(6) 32.	(2) 15.	(3) 10.	(4) 15.	(8) 21.	(1) 5.	(4) 12.	(4) 16.	(2) 7.	(3) 20.	(6) 14.	(2) 5.	(7) 22.	(5) 25.	(47) 15.	(31) 14.	(78) 15.
21 +	(1) 4.	(2) 15.	(5) 12.	(4) 13.	(1) 5.	(1) 7.	(2) 11.	(8) 62.	(1) 3.	(7) 26.	(7) 18.	(5) 24.	(24) 71.	(18) 72.	(3) 11.	(2) 13.	(6) 14.	(6) 16.	(5) 16.	(3) 15.	(55) 18.	(56) 26.	(111) 21.

---

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE J

PROPORTION IN LABOR FORCE, BY GROUP, AND BY AGENCY OF SOURCE

(N : 523)

AGENCY	E		C		TOTAL CASELOAD	
	N	%	N	%	N	%
1	19	83.	11	85.	30	83
2	26	63.	24	80.	50	70
3	10	53.	11	79.	21	64
4	11	58.	9	69.	20	63
5	24	80.	17	63.	41	72
6	23	59.	10	48.	33	55
7	28	82.	21	84.	49	83
8	19	68.	10	67.	29	68
9	27	64.	35	92.	52	77
10	25	78.	18	90.	43	83
TOTALS	212	70.	166	77.	378	72

TABLE K
MEDIAN MONTHS OF CURRENT UNEMPLOYMENT, BY GROUPS & BY AGENCY OF SOURCE [1)]
(N= 523)

	1		2		3		4		5		6		7		8		9		10	
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C
1–3	1	–	4	3	2	3	3	1	1	–	5	–	1	2	–	1	–	10	5	3
4–6	–	–	2	1	2	–	2	3	–	1	4	3	1	3	4	1	2	4	4	1
7–9	2	–	2	1	1	1	1	1	2	3	4	–	6	–	1	–	2	2	4	1
10–12	3	2	8	5	–	2	2	1	5	3	4	4	6	–	3	1	2	3	4	7
13–15	5	3	15	7	9	3	8	4	8	12	15	11	7	6	10	6	16	4	9	2
16–18	1	–	–	1	–	–	–	1	1	2	1	–	2	2	1	1	2	–	1	–
19–22	–	–	–	1	–	–	–	–	–	–	–	–	3	1	–	1	–	–	–	–
23–24	1	–	1	2	2	2	–	–	4	3	2	–	2	2	3	2	2	4	–	–
25 +	10	8	9	9	3	3	3	2	9	3	4	3	6	9	6	2	16	11	5	6
Median	16-18	25+	13-15	13-15	13-15	13-15	13-15	13-15	13-15	13-15	13-15	13-15	13-15	16-18	13-15	13-15	16-18	13-15	10-12	10-12

---

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE L

NUMBER OF JOBS HELD DURING 24 MOS. PRIOR TO J V S REFERRAL BY GROUP, BY AGENCY OF SOURCE 1)

(N= 523)

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	(N = 523)
None	(15) 65.	(8) 62.	(16) 39.	(15) 50.	(5) 26.	(6) 43.	(4) 21.	(4) 31.	(17) 57.	(11) 41.	(10) 26.	(4) 19.	(8) 24.	(7) 28.	(12) 43.	(3) 20.	(14) 33.	(22) 58.	(9) 28.	(8) 40.	(110) 36.	(88) 41.	(198) 38.
1	(3) 13.	(–) –	(6) 15.	(4) 13.	(3) 16.	(1) 7.	(2) 11.	(4) 31.	(5) 17.	(4) 15.	(14) 36.	(4) 19.	(14) 41.	(9) 36.	(3) 11.	(4) 27.	(5) 12.	(9) 24.	(11) 34.	(7) 35.	(66) 21.	(46) 21.	(112) 21.
2	(3) 13.	(4) 31.	(17) 41.	(7) 23.	(10) 53.	(5) 36.	(8) 42.	(4) 31.	(5) 17.	(8) 30.	(14) 36.	(13) 62.	(11) 32.	(9) 36.	(10) 36.	(6) 40.	(21) 50.	(4) 11.	(9) 28.	(4) 20.	(108) 35.	(64) 30.	(172) 33.
3–4	(2) 9.	(1) 8.	(1) 2.	(3) 10.	(1) 5.	(2) 14.	(3) 16.	(–) –	(3) 10.	(3) 11.	(–) –	(–) –	(1) 3.	(–) –	(3) 11.	(1) 7.	(2) 5.	(2) 5.	(2) 6.	(1) 5.	(18) 6.	(13) 6.	(31) 6.
5–6	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(1) 5.	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(1) –	(–) –	(1) –
7+	(–) –	(–) –	(1) 2.	(1) 3.	(–) –	(–) –	(1) 5.	(1) 8.	(–) –	(1) 4.	(1) 3.	(–) –	(–) –	(–) –	(–) –	(1) 7.	(–) –	(1) 3.	(1) 3.	(–) –	(4) 1.	(5) 2.	(9) 2.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE M
EMPLOYMENT SINCE CLIENT LEFT WORKSHOP & TIME OF CONTINUATION,BY GROUP, BY AGENCY OF SOURCE

(N = 523)

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD
	E	C.	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	(N = 523)
Since Client Left Workshop: UNEMPLOYED	(6) 26.	(5) 38.	(14) 34.	(11) 37.	(3) 16.	(7) 50.	(2) 11.	(2) 15.	(14) 47.	(20) 74.	(1) 3.	(–) –	(14) 41.	(14) 56.	(8) 29.	(4) 27.	(36) 86.	(10) 26.	(17) 53.	(17) 85.	(115) 37.	(90) 42.	(205) 39.
EMPLOYED	(17) 74.	(8) 62.	(27) 66.	(19) 63.	(16) 84.	(7) 50.	(17) 89.	(11) 85.	(16) 53.	(7) 26.	(38) 97.	(21) 100.	(20) 59.	(11) 44.	(20) 71.	(11) 73.	(6) 14.	(28) 74.	(15) 47.	(3) 15.	(192) 63.	(126) 58.	(318) 61.
At Time of Continuation: UNEMPLOYED	(8) 35.	(6) 46.	(17) 41.	(13) 43.	(8) 42.	(8) 57.	(3) 16.	(4) 31.	(15) 50.	(20) 74.	(5) 13.	(–) –	(20) 59.	(16) 64.	(13) 46.	(5) 33.	(37) 88.	(18) 47.	(28) 88.	(19) 95.	(154) 50.	(109) 50.	(263) 50.
EMPLOYED	(15) 65.	(7) 54.	(24) 59.	(17) 57.	(11) 58.	(6) 43.	(16) 84.	(9) 69.	(15) 50.	(7) 26.	(34) 87.	(21) 100.	(14) 41.	(9) 36.	(15) 54.	(10) 67.	(5) 12.	(20) 53.	(4) 13.	(1) 5.	(153) 50.	(107) 50.	(260) 50.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE N - PRIMARY DISABILITY, BY GROUP, BY AGENCY OF SOURCE 1)

	1		2		3		4		5		6		7		8		9		10				TOTAL CASELOAD
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N = 523
Mentally Retarded	(3) 13.	(5) 38.	(16) 39.	(12) 40.	(7) 37.	(3) 21.	(1) 5.	(1) 8.	(5) 17.	(5) 19.	(8) 21.	(7) 33.	(–) –	(–) –	(–) –	(1) 7.	(9) 21.	(13) 34.	(10) 31.	(2) 10.	(59) 19.	(49) 23.	(108) 21.
Emotionally Disturbed – Mild	(7) 30.	(2) 15.	(6) 15.	(3) 10.	(4) 21.	(–) –	(3) 16.	(2) 15.	(3) 10.	(3) 11.	(12) 31.	(6) 29.	(3) 9.	(2) 8.	(3) 11.	(3) 20.	(15) 36.	(14) 37.	(4) 13.	(–) –	(60) 20.	(35) 16.	(95) 18.
Emotionally Disturbed – Severe	(11) 48.	(3) 23.	(10) 24.	(6) 20.	(5) 26.	(11) 79.	(8) 42.	(5) 38.	(11) 37.	(19) 70.	(17) 44.	(5) 24.	(1) 3.	(2) 8.	(24) 86.	(11) 73.	(11) 26.	(1) 3.	(7) 22.	(4) 20.	(105) 34.	(67) 31.	(172) 33.
Physically Disabled	(2) 9.	(3) 23.	(9) 22.	(9) 9.	(3) 16.	(–) –	(7) 37.	(5) 38.	(11) 37.	(–) –	(2) 5.	(3) 14.	(30) 88.	(21) 84.	(1) 4.	(–) –	(7) 17.	(10) 26.	(11) 34.	(14) 70.	(83) 27.	(65) 30.	(148) 28.

TABLE O
MULTI-DISABILITY, BY GROUP, BY AGENCY OF SOURCE 1)

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N =523
Single Disability	(17) 74.	(8) 62.	(20) 49.	(19) 63.	(12) 63,	(13) 93.	(16) 84.	(6) 46.	(21) 70.	(23) 85.	(22) 56.	(12) 57.	(18) 53.	(15) 60.	(22) 79.	(12) 80.	(26) 62.	(38) 100.	(26) 81.	(13) 65.	(200) 65.	(159) 74.	(359) 69.
Multi-Disability	(6) 26.	(5) 38.	(21) 51.	(11) 37.	(7) 37.	(1) 7.	(3) 16.	(7) 54.	(9) 30.	(4) 15.	(17) 44.	(9) 43.	(16) 47.	(10) 40.	(6) 21.	(3) 20.	(16) 38.	(–) –	(6) 19.	(7) 35.	(107) 35.	(57) 26.	(164) 31.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE P
STATE OF GENERAL HEALTH, BY GROUP, BY AGENCY OF SOURCE 1)

	1		2		3		4		5		6		7		8		9		10		TOTALS		TOTAL CASELOAD (N = 523)
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Severely Impaired	(1) 4	(–) –	(1) 2	(–) –	(–) –	(–) –	(2) 11.	(–) –	(1) 3.	(1) 4.	(1) 3.	(1) 5.	(6) 18.	(1) 4.	(–) –	(–) –	(5) 12.	(–) –	(–) –	(–) –	(17) 6.	(3) 1.	(20) 4.
Moderately Impaired	(6) 26.	(4) 31.	(3) 7.	(5) 17.	(–) –	(–) –	(1) 5.	(5) 38.	(–) –	(–) –	(5) 13.	(1) 5.	(17) 50.	(9) 36.	(2) 7.	(–) –	(7) 17.	(1) 3.	(1) 3.	(2) 10.	(42) 14.	(27) 15.	(69) 13.
Mildly Impaired	(6) 26.	(7) 54.	(17) 41.	(10) 33.	(4) 21.	(5) 36.	(7) 37.	(1) 8.	(5) 17.	(–) –	(6) 15.	(3) 14.	(4) 12.	(10) 40.	(6) 21.	(5) 33.	(12) 29.	(1) 3.	(8) 25.	(13) 65.	(75) 24.	(55) 25.	(130) 25.
Generally Adequate	(10) 43.	(2) 15.	(20) 49.	(15) 50.	(15) 79.	(9) 64.	(9) 47.	(7) 54.	(24) 80.	(26) 96.	(27) 69.	(16) 76.	(7) 21.	(5) 5.	(20) 71.	(10) 67.	(18) 43.	(36) 95.	(23) 72.	(5) 25.	(173) 56.	(131) 59.	(304) 58.

TABLE Q CLIENT'S GENERAL SOCIAL ADJUSTMENT OUTSIDE OF SPECIFIC EMPLOYMENT STATUS, BY GROUP, BY AGENCY OF SOURCE 1)

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Severely Impaired	(4) 17.	(6) 46.	(6) 15.	(4) 13.	(3) 16.	(3) 21.	(2) 11.	(3) 23.	(–) –	(–) –	(5) 13.	(–) –	(1) 3.	(1) 4.	(1) 4.	(1) 7.	(6) 14.	(–) –	(2) 6.	(3) 15.	(30) 10.	(21) 10.	(51) 10.
Moderately Impaired	(6) 26.	(3) 23.	(19) 46.	(17) 57.	(5) 26.	(5) 36.	(8) 42.	(2) 15.	(4) 13.	(6) 22.	(10) 26.	(7) 33.	(11) 32.	(4) 16.	(13) 46.	(8) 53.	(19) 45.	(–) –	(7) 22.	(5) 25.	(102) 33.	(57) 26.	(159) 30.
Mildly Impaired	(8) 35.	(1) 8.	(13) 32.	(8) 27.	(10) 53.	(3) 21.	(3) 16.	(2) 15.	(13) 43.	(16) 59.	(17) 44.	(8) 38.	(9) 26.	(7) 28.	(13) 46.	(4) 27.	(14) 33.	(2) 5.	(10) 31.	(10) 50.	(110) 36.	(61) 28.	(171) 33.
Generally Adequate	(5) 22.	(3) 23.	(3) 7.	(1) 3.	(1) 5.	(3) 21.	(6) 32.	(6) 46.	(13) 43.	(5) 19.	(7) 18.	(6) 29.	(13) 38.	(13) 52.	(1) 4.	(2) 13.	(3) 7.	(36) 95.	(13) 41.	(2) 10.	(65) 21.	(77) 36.	(142) 27.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE R
MOTIVATION FOR WORK, BY GROUP, BY AGENCY OF SOURCE 1)
(N = 523)

	1		2		3		4		5		6		7		8		9		10		TOTALS		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Unmotivated	(–) –	(–) –	(–) –	(–) –	(–) –	(2) 14.	(1) 5.	(–) –	(–) –	(–) –	(–) –	(–) –	(1) 3.	(–) –	(–) –	(–) –	(2) 5.	(–) –	(1) 3.	(–) –	(5) 2.	(2) 1.	(7) 1.
Considerable Ambivalence	(2) 9.	(2) 15.	(9) 22.	(11) 37.	(2) 11.	(1) 7.	(3) 16.	(4) 31.	(2) 7.	(4) 15.	(6) 15.	(–) –	(4) 12.	(5) 20.	(5) 18.	(2) 13.	(8) 19.	(–) –	(3) 9.	(9) 45.	(44) 14.	(38) 18.	(82) 16.
Somewhat Ambivalent	(8) 35.	(6) 46.	(19) 46.	(11) 37.	(8) 42.	(4) 29.	(4) 21.	(2) 15.	(8) 27.	(11) 41.	(17) 44.	(6) 29.	(9) 26.	(7) 28.	(16) 57.	(9) 60.	(17) 40.	(3) 8.	(11) 34.	(11) 55.	(117) 38.	(70) 32.	(187) 36.
Strongly Motivated	(13) 57.	(5) 38.	(13) 32.	(8) 27.	(9) 47.	(7) 50.	(11) 58.	(7) 54.	(20) 67.	(12) 44.	(16) 41.	(15) 71.	(20) 59.	(13) 52.	(7) 25.	(4) 27.	(15) 36.	(35) 92.	(17) 53.	(–) –	(141) 46.	(106) 49.	(247) 47.

TABLE S
REALISM OF VOCATIONAL ASPIRATIONS BY GROUP, BY AGENCY SOURCE 1) (N - 523)

	1		2		3		4		5		6		7		8		9		10		TOTALS		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Unrealistic	(–) –	(–) –	(2) 5.	(2) 7.	(–) –	(–) –	(1) 5.	(–) –	(–) –	(–) –	(–) –	(–) –	(1) 3.	(–) –	(5) 18.	(1) 7.	(2) 5.	(–) –	(2) 6.	(2) 10.	(13) 4.	(5) 2.	(18) 3.
Moderately Unrealistic	(1) 4.	(2) 15.	(8) 20.	(4) 13.	(1) 5.	(4) 29.	(3) 16.	(1) 8.	(–) –	(–) –	(4) 10.	(–) –	(1) 3.	(3) 12.	(3) 11.	(–) –	(4) 10.	(1) 3.	(4) 13.	(6) 30.	(29) 9.	(21) 10.	(50) 10.
Mildly Unrealistic	(6) 26.	(2) 15.	(20) 49.	(21) 70.	(6) 32.	(6) 43.	(5) 26.	(4) 31.	(11) 37.	(17) 63.	(16) 41.	(6) 29.	(9) 26.	(11) 44.	(6) 21.	(6) 40.	(24) 57.	(7) 18.	(13) 41.	(10) 50.	(116) 38.	(90) 42.	(206) 39.
Quite Realistic	(16) 70.	(9) 69.	(11) 27.	(3) 10.	(12) 63.	(4) 29.	(10) 53.	(8) 62.	(19) 63.	(10) 37.	(19) 49.	(15) 71.	(23) 68.	(11) 44.	(14) 50.	(8) 53.	(12) 29.	(30) 79.	(13) 41.	(2) 10.	(149) 49.	(100) 46.	(249) 48.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
E - Experimental
C - Control

TABLE T - ESTIMATE OF PLACEABILITY, BY GROUP, BY AGENCY OF SOURCE [1]
(N : 523)

	1		2		3		4		5		6		7		8		9		10		TOTALS		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Unplaceable	(–) –	(–) –	(1) 2.	(1) 3.	(1) 5.	(3) 21.	(1) 5.	(–) –	(–) –	(–) –	(–) –	(–) –	(–) –	(1) 4.	(5) 18.	(3) 20.	(–) –	(–) –	(1) 3.	(–) –	(9) 3.	(8) 4.	(17) 3.
Very Difficult to Place	(10) 43.	(7) 54.	(20. 49.	(19) 63.	(9) 47.	(2) 14.	(6) 32.	(6) 46.	(2) 7.	(4) 15.	(14) 36.	(3) 14.	(16) 47.	(5) 20.	(7) 25.	(1) 7.	(28) 67.	(–) –	(3) 9.	(9) 45.	(115) 37.	(56) 26.	(171) 33.
Moderately Difficult to Place	(11) 48.	(4) 31.	(20) 49.	(10) 33.	(7) 37.	(7) 50.	(9) 47.	(3) 23.	(20) 67.	(19) 70.	(23) 59.	(14) 67.	(15) 44.	(16) 64.	(12) 43.	(7) 47.	(13) 31.	(18) 47.	(13) 41.	(10) 50.	(143) 47.	(108) 50.	(251) 48.
Easily Placeable	(2) 9.	(2) 15.	(–) –	(–) –	(2) 11.	(2) 14.	(3) 16.	(4) 31.	(8) 27.	(4) 15.	(2) 5.	(4) 19.	(3) 9.	(3) 12.	(4) 14.	(4) 27.	(1) 2.	(20) 53.	(15) 47.	(1) 5.	(40) 13.	(44) 20.	(84) 16.

TABLE U - Estimate After Workshop of Client Ability to Maintain Employment, by Group, By Agency [1] (N : 523)

	1		2		3		4		5		6		7		8		9		10		TOTALS		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
0 – 24	(1) 4.	(7) 54.	(1) 2.	(2) 7.	(2) 11.	(5) 36.	(3) 16.	(1) 8.	(1) 3.	(2) 8.	(3) 8.	(–) –	(1) 3.	(1) 4.	(4) 14.	(2) 13.	(3) 7.	(–) –	(2) 6.	(–) –	(21) 7.	(20) 9.	(41) 8.
25 – 49	(9) 39.	(1) 8.	(15) 37.	(13) 43.	(4) 21.	(2) 14.	(1) 5.	(1) 8.	(3) 10.	(6) 22.	(6) 15.	(1) 5.	(9) 26.	(3) 12.	(2) 7.	(2) 13.	(13) 31.	(–) –	(3) 9.	(2) 10.	(65) 21.	(31) 14.	(96) 18.
50 – 74	(7) 30.	(3) 23.	(19) 46.	(13) 43.	(10) 53.	(2) 14.	(7) 37.	(4) 31.	(11) 37.	(13) 48.	(19) 49.	(6) 29.	(20) 59.	(13) 52.	(8) 29.	(5) 33.	(19) 45.	(2) 5.	(3) 9.	(9) 45.	(123) 41.	(70) 32.	(193) 37.
75 – 100	(6) 26.	(2) 15.	(6) 15.	(2) 7.	(3) 16)	(5) 36.	(8) 42.	(7) 54.	(15) 50.	(6) 22.	(11) 28.	(14) 67.	(4) 12.	(8) 32.	(14) 50.	(6) 40.	(7) 17.	(36) 95.	(24) 75.	(9) 45.	(98) 31.	(95) 45.	(193) 37.

---

[1] Column numbers indicate Agencies
Client numbers (top numbers in each box)
E - Experimental
C - Control

TABLE $V_{1)}$ - Worked at all (1st 6 Mos. Follow-Up), by Group, by Agency [1)]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N = 523
Never Worked	(6) 26.	(7) 54.	(8) 20.	(9) 30,	(2) 11.	(4) 29.	(2) 11.	(5) 38.	(6) 20.	(9) 33.	(2) 5.	(–) –	(10) 29.	(14) 56.	(5) 18.	(6) 40.	(8) 19.	(3) 8.	(5) 16.	(11) 55.	(54) 18.	(68) 31.	(122) 23.
Worked	(17) 74.	(6) 46.	(33) 80.	(21) 70.	(17) 89.	(10) 71.	(17) 89.	(8) 62.	(24) 80.	(18) 67.	(37) 95.	(21) 100.	(24) 71.	(11) 44.	(23) 82.	(9) 60.	(34) 81.	(35) 92,	(27) 84.	(9) 45.	(253) 82.	(148) 69.	(401) 77.

TABLE $V_{2)}$ - Percentage Worked of Available Time (1st 6 Mos. Follow-Up), by Group, by Agency [1)]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N = 523
0–24	(7) 30.	(7) 54.	(9) 22.	(11) 37.	(5) 26	(5) 36.	(3) 16.	(6) 46.	(8) 27.	(9) 33.	(5) 13.	(1) 5.	(11) 32.	(14) 56.	(6) 21.	(6) 40.	(10) 24.	(5) 13.	(11) 34.	(14) 70.	(75) 24.	(78) 36.	(153) 29.
25–49	(–) --	(–) –	(4) 10.	(1) 3.	(1) 5.	(1) 7.	(–) –	(–) –	(3) 10.	(3) 11.	(2) 5.	(–) –	(3) 9.	(–) –	(1) 4.	(–) –	(8) 19.	(1) 3.	(5) 16.	(1) 5.	(27) 9.	(7) 3.	(34) 7.
50–74	(1) 4.	(2) 15.	(2) 5.	(3) 10.	(4) 21.	(5) 36.	(4) 21.	(1) 8.	(3) 10.	(6) 22.	(2) 5.	(1) 5.	(4) 12.	(3) 12.	(5) 18.	(1) 7.	(4) 10.	(8) 21.	(6) 19.	(3) 15.	(35) 11.	(33) 15.	(68) 13.
75–100	(15) 65.	(4) 31.	(26) 63.	(15) 50.	(9) 47.	(3) 21.	(12) 63.	(6) 46.	(16) 53.	(9) 33.	(30) 77.	(19) 90.	(16) 47.	(8) 32.	(16) 57.	(8) 53.	(20) 48.	(24) 63.	(10) 31.	(2) 10.	(170) 55.	(98) 45.	(268) 51.

TABLE V_3 - Working at End of Follow-Up (1st 6 Mos.), by Group, By Agency [1)]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N = 523
Not Working	(8) 35.	(7) 54.	(15) 37.	(16) 53.	(7) 37.	(6) 43.	(6) 32.	(7) 54.	(15) 50.	(13) 48.	(15) 38.	(1) 5.	(14) 41.	(16) 64.	(8) 29.	(7) 47.	(17) 40.	(9) 24.	(13) 41.	(15) 75.	(118) 38.	(97) 45.	(215) 41.
Working	(15) 65.	(6) 46.	(26) 63.	(14) 47.	(12) 63.	(8) 57.	(13) 68.	(6) 46.	(15) 50.	(14) 52.	(24) 62.	(20) 95.	(20) 59.	(9) 36 .	(20) 71.	(8) 53.	(25) 60.	(29) 76.	(19) 59.	(5) 25.	(189) 62.	(119) 55.	(308) 59.

1) Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE $W_{1)}$ - WORKED AT ALL (2ND 6 MOS. FOLLOW-UP), BY GROUP, BY AGENCY [1)]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N = 523
Never Worked	(6) 26.	(8) 62.	(10) 24.	(8) 27.	(3) 16.	(3) 21.	(3) 16.	(4) 31.	(8) 27.	(11) 41.	(8) 21.	(1) 5.	(11) 32.	(16) 64.	(6) 21.	(6) 40.	(8) 19.	(5) 13.	(11) 34.	(12) 60.	(74) 24.	(74) 34.	(148) 28.
Worked	(17) 74.	(5) 38.	(31) 76.	(22) 73.	(16) 84.	(11) 79.	(16) 84.	(9) 69.	(22) 73.	(16) 59.	(31) 79.	(20) 95.	(23) 68.	(9) 36.	(22) 79.	(9) 60.	(34) 81.	(33) 87.	(21) 66.	(8) 40.	(233) 76.	(142) 66.	(375) 72.

TABLE $W_{2)}$ - Percentage Worked of Available Time (2nd 6 mos. Follow-Up), by Group, by Agency [1)]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N = 523
0 – 24	(6) 26.	(8) 62.	(11) 27.	(11) 37.	(5) 26.	(5) 36.	(4) 21.	(5) 38.	(8) 27.	(12) 44.	(8) 21.	(1) 5.	(12) 35.	(18) 72.	(8) 29.	(7) 47.	(8) 19.	(6) 16.	(13) 41.	(12) 60.	(83) 27.	(85) 39.	(168) 32.
25 – 49	(1) 4.	(–) –	(3) 7.	(2) 7.	(2) 11.	(1) 7.	(–) –	(–) –	(2) 7.	(2) 7.	(2) 5.	(–) –	(2) 6.	(1) 4.	(–) –	(–) –	(–) –	(3) 8	(–) –	(–) –	(12) 4.	(9) 4.	(21) 4.
50 – 74	(3) 13.	(1) 8.	(2) 5.	(–) –	(1) 5.	(2) 14.	(–) –	(1) 8.	(3) 10.	(1) 4.	(4) 10.	(–) –	(2) 6.	(–) –	(2) 7.	(1) 7.	(3) 7.	(2) 5.	(2) 6.	(–) –	(22) 7.	(8) 4.	(30) 6.
75 – 100	(13) 57.	(4) 31.	(25) 61.	(17) 57.	(11) 58.	(6) 43.	(15) 79.	(7) 54.	(17) 57.	(12) 44.	(25) 64.	(20) 95.	(18) 53.	(6) 24.	(18) 64.	(7) 47.	(31) 74.	(27) 71.	(17) 53.	(8) 40.	(190) 62.	(114) 53.	(304) 58.

TABLE $W_{3)}$ - Working at End of Follow-Up (2nd 6 mos. Follow-Up), by Group, By Agency [1)]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	N = 523
Not Working	(7) 30.	(8) 62.	(13) 32.	(12) 40.	(6) 32.	(5) 36.	(5) 26.	(7) 54.	(9) 30.	(16) 59.	(14) 36.	(1) 5.	(16) 47.	(18) 72.	(9) 32.	(7) 47.	(10) 24.	(12) 32.	(13) 41.	(12) 60.	(102) 33.	(98) 45.	(200) 38.
Working	(16) 70.	(5) 38.	(28) 68.	(18) 60.	(13) 68.	(9) 64.	(14) 74.	(6) 46.	(21) 70.	(11) 41.	(25) 64.	(20) 95.	(18) 53.	(7) 28.	(19) 68.	(8) 53.	(32) 76.	(26) 68.	(19) 59.	(8) 40.	(205) 67.	(118) 55.	(323) 62.

[1)] Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

TABLE X_1 - Worked At All (12 mos. Follow-Up), by Group, By Agency of Source [1]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Never Worked	(5) 22.	(7) 54.	(4) 10.	(6) 20.	(1) 5.	(2) 14.	(1) 5.	(4) 31.	(4) 13.	(8) 30.	(1) 3.	(–) –	(9) 26.	(12) 48.	(4) 14.	(6) 40.	(6) 14.	(3) 8.	(4) 13.	(9) 45.	(39) 13.	(57) 26.	(96) 18.
Worked	(18) 78.	(6) 46.	(37) 90.	(24) 80.	(18) 95.	(12) 86.	(18) 95.	(9) 69.	(26) 87.	(19) 70.	(38) 97.	(21) 100.	(25) 74.	(13) 52.	(24) 86.	(9) 60.	(36) 86.	(35) 92.	(28) 88.	(11) 55.	(268) 87.	(159) 74.	(427) 82.

TABLE X_2-Percentage Worked of Available Time (12 Mos. Follow-Up), By Group, By Agency of Source [1]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
0 – 24	(5) 22.	(7) 54.	(4) 10.	(10) 33.	(4) 21.	(3) 21.	(3) 16.	(4) 31.	(5) 17.	(10) 37.	(5) 13.	(1) 5.	(10) 29.	(13) 52.	(5) 18.	(6) 40.	(7) 17.	(4) 11.	(10) 31.	(11) 55.	(58) 19.	(69) 32.	(127) 24.
25 – 49	(1) 4.	(1) 8.	(7) 17.	(1) 3.	(1) 5.	(2) 14.	(–) –	(3) 23.	(4) 13.	(4) 15.	(2) 5.	(–) –	(1) 3.	(1) 4.	(1) 4.	(–) –	(3) 7.	(3) 8.	(3) 9.	(2) 10.	(23) 7.	(17) 8.	(40) 8.
50 – 74	(2) 9.	(1) 8.	(7) 17.	(2) 7.	(3) 16.	(5) 36.	(–) –	(–) –	(4) 13.	(–) –	(5) 13.	(–) –	(6) 18.	(4) 16.	(6) 21.	(2) 13.	(8) 19.	(4) 11.	(4) 13.	(3) 15.	(45) 11.	(21) 10.	(66) 13.
75 – 100	(15) 65.	(4) 31.	(23) 56.	(17) 57.	(11) 58.	(4) 29.	(16) 84.	(6) 46.	(17) 57.	(13) 48.	(27) 69.	(20) 95.	(17) 50.	(7) 28.	(16) 57.	(7) 47.	(24) 57.	(27) 71.	(15) 47.	(4) 20.	(181) 63.	(109) 50.	(290) 55.

TABLE X_3-Working at End of Follow-Up (12 Mos.), By Group, By Agency of Source [1]

	1		2		3		4		5		6		7		8		9		10		TOTAL		TOTAL CASELOAD N = 523
	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	E	C	
Not Working	(7) 30.	(8) 62.	(13) 32.	(12) 40.	(6) 32.	(5) 36.	(5) 26.	(7) 54.	(9) 30.	(16) 59.	(14) 36.	(1) 5.	(16) 47.	(18) 72.	(9) 32.	(7) 47.	(10) 24.	(12) 32.	(13) 41.	(12) 60.	(102) 33.	(98) 45.	(200) 38.
Working	(16) 70.	(5) 38.	(28) 68.	(18) 60.	(13) 68.	(9) 64.	(14) 74.	(6) 46.	(21) 70.	(11) 41.	(25) 64.	(20) 95.	(18) 53.	(7) 28.	(19) 68.	(8) 53.	(32) 76.	(26) 68.	(19) 59.	(8) 40.	(205) 67.	(118) 55.	(323) 62.

[1] Column numbers indicate Agencies
Client numbers (top numbers in each box)
o/o of Agency caseload (bottom numbers in each box)
E - Experimental
C - Control

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39
001	1.000																																						
002	.045																																						
003	.068-	.060																																					
004	.021	.084	.695																																				
005	.011	.136	.136	.076																																			
006	.051-	.064	.888	.639	.086																																		
007	.107-	.185-	.764	.513	.076	.732																																	
008	.097-	.163-	.726	.505	.072	.667	.932																																
009	.086-	.124-	.120	.087	.062	.124	.247	.201																															
010	.012-	.027	.195	.087	.003-	.238	.186	.090	.092																														
011	.021	.004	.081-	.017-	.021	.080-	.096	.074-	.250-	.396-																													
012	.042	.053-	.014-	.035-	.013	.026-	.014	.026	.016-	.124-	.076																												
013	.003	.078-	.005	.072-	.030	.014	.033	.051	.008-	.081-	.060	.791																											
014	.043	.099	.075-	.086-	.120	.056-	.080-	.074-	.048	.072	.050-	.114	.117																										
015	.033	.047	.051	.024	.301	.126	.008-	.065-	.130-	.031	.104	.013-	.020	.330-																									
016	.033	.104-	.409	.358	.026-	.292	.378	.396	.152	.034	.005-	.061-	.090-	.296-	.440-																								
017	.090	.070-	.030	.014	.095-	.010	.063	.057	.032	.060	.017	.002	.020	.030-	.149-	.188																							
018	.080-	.012	.364-	.246-	.002	.320-	.261-	.232-	.125-	.122-	.098	.172	.112	.056	.076	.255-	.334-																						
019	.110-	.030-	.139	.179	.001-	.065	.159	.228	.103	.016-	.091-	.129	.053	.029	.306-	.230	.128-	.217																					
020	.008-	.065	.041	.042	.011	.018	.048	.104	.049	.148-	.038	.244	.242	.042	.161-	.078	.098-	.208	.422																				
021	.008-	.046	.166	.123	.054	.148	.117	.148	.028	.040	.081-	.220	.186	.029-	.055-	.043	.090-	.107	.338	.464																			
022	.114-	.018	.046	.103	.154	.050	.137	.172	.145	.070-	.014-	.222	.169	.092	.061-	.001	.209-	.269	.481	.411	.409																		
023	.074	.017	.061	.051	.143	.051	.144	.166	.111	.062-	.040-	.244	.187	.081	.118-	.109	.101-	.179	.448	.496	.350	.625																	
024	.162	.039-	.133-	.117-	.063	.116-	.058-	.044	.022	.087	.026	.456	.422	.143	.028-	.125-	.056-	.220	.105	.241	.150	.221	.255																
025	.110	.070-	.145-	.118-	.052-	.112-	.055-	.041-	.019	.057-	.005	.278	.311	.076	.075-	.077-	.004	.160	.121	.212	.153	.174	.211	.617															
026	.174	.044-	.160-	.066-	.014	.136-	.079-	.060-	.029-	.098-	.004-	.388	.373	.121	.047-	.119-	.031-	.225	.104	.215	.138	.209	.227	.860	.755														
027	.111	.095-	.092-	.100-	.055	.065-	.007-	.002-	.033	.072-	.027	.539	.554	.107	.024-	.079-	.023-	.191	.111	.283	.185	.216	.301	.806	.599	.693													
028	.118	.079-	.145-	.123-	.055-	.116-	.034-	.025-	.048	.047-	.012-	.277	.299	.078	.095-	.066	.017	.179	.106	.240	.165	.181	.252	.590	.881	.665	.636												
029	.142	.096-	.118-	.075-	.004	.110-	.017-	.006-	.020	.056-	.003	.448	.469	.097	.049-	.084-	.000	.202	.119	.282	.203	.226	.307	.750	.782	.772	.882	.869											
030	.065	.062-	.100-	.120-	.005-	.107-	.023-	.005-	.047	.028-	.019-	.308	.326	.071	.077-	.053-	.038-	.147	.139	.246	.169	.203	.251	.660	.657	.568	.697	.717	.728										
031	.123	.061-	.157-	.124-	.084	.119-	.079-	.068-	.022	.013-	.001-	.231	.239	.044	.111-	.047-	.002-	.150	.126	.222	.178	.177	.206	.487	.790	.603	.528	.840	.726	.638									
032	.029	.060	.045	.073-	.007	.020-	.057-	.051-	.067	.142	.095-	.048	.062	.048	.035	.087-	.005-	.119-	.101-	.035	.104	.047	.155-	.082-	.064-	.105-	.014-	.048-	.042-	.003-	.019								
033	.008-	.010-	.200-	.139-	.276-	.153-	.125-	.157-	.016-	.004	.001-	.032	.064	.056-	.087-	.026-	.117	.010-	.209-	.141-	.201-	.198-	.168-	.006-	.026	.044	.021	.011	.021	.021-	.025	.108-							
034	.006-	.015-	.105-	.108-	.074-	.093-	.100-	.105-	.050-	.027-	.021	.047	.009	.041-	.086	.111-	.040-	.108	.086-	.005-	.007	.077-	.109-	.032	.058	.062	.035-	.013-	.008-	.009	.026	.071-	.103-						
035	.004	.089	.169	.131	.052	.272	.082	.095	.056-	.091-	.128	.140	.145	.017-	.042	.052	.001-	.056-	.006-	.003-	.021	.004	.035	.009	.036	.018	.035	.033	.045	.003	.004	.069-	.101-	.066-					
036	.043-	.029-	.070-	.038-	.252	.063	.055-	.062-	.003-	.058	.026	.147-	.078-	.069-	.147	.070-	.065-	.178	.135	.076	.088	.157	.029	.025-	.039-	.024-	.040-	.046-	.051-	.057-	.040-	.095-	.139-	.091-	.089-				
037	.008-	.026-	.616	.435	.033-	.309	.427	.453	.086	.044	.022-	.060-	.077-	.090-	.211-	.460	.098	.354-	.129	.039	.074	.027-	.037-	.146-	.138-	.159-	.112-	.146-	.121-	.071-	.142-	.097-	.141-	.093-	.091-	.125-			
038	.039	.002	.121-	.176-	.083	.110-	.086-	.077-	.032-	.025	.046	.069	.050	.033-	.309	.173-	.067	.098	.089-	.076-	.057-	.056-	.021	.016-	.003	.038-	.027	.033-	.002	.038	.006	.081-	.119-	.078-	.076-	.105-	.107-		
039	.054-	.026-	.135-	.067-	.044-	.074	.099-	.086-	.050	.052	.049-	.159-	.157-	.199	.162-	.067-	.104-	.038	.146	.102	.055	.081	.124	.096	.114	.078	.056	.135	.089	.074	.094	.116-	.168-	.110-	.109-	.149-	.152-	.127	
040	.019	.021	.081-	.078	.015-	.025-	.008-	.008-	.077	.107-	.007-	.178-	.267-	.090-	.083-	.146	.046-	.042	.032	.099-	.157-	.119	.155	.059-	.118-	.057-	.178-	.089-	.146-	.086-	.067-	.090-	.132-	.086-	.085-	.116-	.119-	.099-	.141-

APPENDIX II

FORMS

FORM A - JOC Project on Disabled Workshop Trainees

OVER-ALL MONTHLY STATISTICAL SERVICE REPORT TO JOC

Name of Agency:____________________________

Name of Counselor:__________________________

MONTH:__________________________

	GROUP A (Experimental Group)					
Disability Classifications	Number who could not be located	Number who refused service	Number who indicated interest and then dropped out	TOTAL Accepted for service	Number designated for GROUP B (Comparison Group)	Number from GROUP B requesting service (Comparison Group II-B2)
Mental Retardation						
Emotional Disorders						
Mild (Neuroses)						
Severe (Psychoses)						
Physical Disability						
Disabled Aged						
TOTALS						

FORM B – JOC PROJECT ON
DISABLED WORKSHOP TRAINEES

MONTHLY CASELOAD STATISTICAL SERVICE REPORT TO JOC ON EXPERIMENTAL GROUP

Name of Agency______________________________

Name of Counselor______________________________

MONTH______________________________

EXPERIMENTAL GROUP (GROUP A) CASELOAD CLIENTS	Source of Referral (write in one) DVR VRA JVS			STATISTICS ON COUNSELOR ACTIVITY							STATISTICS ON CLIENT ACTIVITY		
NAME		AGE	(1) MAJOR DISABILITY	NO. OF INTERVIEWS	NO. OF JOB REFERRALS	NO. OF EMPLOYERS SOLICITED	NO. OF FOLLOW-UP CONTACTS WITH EMPLOYERS	NO. OF CONTACTS WITH FAMILY	NO. OF REFERRALS AND/OR Contacts with SOC. AGEN.	NO. OF REFERRALS AND/OR Contacts with CLINIC OR PHYSICIANS	(2) NO. OF EMPLOYERS SOLICITED BY CLIENT	NO. OF CONTACTS MADE BY CLIENT WITH SOCIAL AGENCIES	NO. OF CONTACTS MADE BY CLIENT WITH CLINIC OR PHYSICIANS

(1) M.R. – Mental Retardation
EDM – Emotional Disorder (mild)
EDS – Emotional Disorder (Severe)
P.D. – Physical Disability
D.A. – Disabled Aged

(2) Includes registration at State Employment Service

FORM C - JOC Project on Disabled Workshop Trainees

DATA COLLECTION

Name of Agency:____________________

Name of Counselor:____________________

Date:____________________

NAME OF CLIENT____________________

A. PERSONAL DATA

Sex
Male__________ Female__________

Age________ (at time of completion of workshop to nearest birthday)

Marital Status
Single________ Divorced________
Separated__________
Married and living with spouse - no children__________
Married and living with spouse - children__________
Widow__________ Widower__________

Education Years
Primary Grades 1-4__________
5-7__________
Completed Primary __________
Secondary Grades 9__________
10__________
11__________
12__________
Some college or more __________
Ungraded __________
Not known __________

Father's Occupation
1 DOT Classif. 0-1__________
2 " " 2-3__________
3 " " 4-5__________
4 " " 6__________
5 " " 7__________
6 " " 8__________
7 " " 9__________
8 Not available __________

Mother's Occupation
1 DOT Classif. 0-1__________
2 " " 2-3__________
3 " " 4-5__________
4 " " 6__________
5 " " 7__________
6 " " 8__________
7 " " 9__________
8 Not available __________

Number of years between finishing school and referral to JVS________

B. EMPLOYMENT DATA

Number of years in labor force (exclude years in hospital; as a housewife, etc.) __________

Amount of employment as % of time in labor force (estimate)
75-100% __________
50- 74% __________
25- 49% __________
0- 24% __________

Number of months of current unemployment prior to initial referral to JVS for rehabilitation
1- 3 __________
4- 6 __________
7- 9 __________
10-12 __________
13-15 __________
16-18 __________
19-22 __________
22-24 __________
Over 24 __________
Not in labor force __________

FORM C - Page 2

NAME OF CLIENT____________________

No. of jobs held during 24 mos. prior to initial referral to JVS:
1 __________
2 __________
3 __________
4 __________
5 __________
6 __________
Over 6 __________
None __________
Not in labor force __________

Principal DOT Classification of Client prior to referral:
1 DOT Classif. 0-1__________
2 " " 2-3__________
3 " " 4-5__________
4 " " 6__________
5 " " 7__________
6 " " 8__________
7 " " 9__________
Not available nor applicable __________

Since client left workshop he has been:
Employed __________
Unemployed __________

Since leaving workshop, number of jobs held __________

At time of continuation:
Client was employed __________
Client was unemployed __________

C. HEALTH AND SOCIAL DATA

Major Disability Classification:
Mental retardation __________
Emotional disorder:
Mild __________
Severe __________
Physical disability __________
Disabled aged __________

Is there more than one disability:
Yes__________ No__________

State of Client's general health outside of major disability (Estimate as deterrent to employment):
Generally adequate __________
Mildly impaired __________
Moderately impaired __________
Severely impaired __________

Client's general social adjustment outside of specific employment status (General estimate):
Generally adequate __________
Mildly impaired __________
Moderately impaired __________
Severely impaired __________

D. ESTIMATE OF EMPLOYMENT FUTURE

Over-all estimate of motivation for work:
Strongly motivated __________
Somewhat ambivalent __________
Considerable ambivalence __________
Unmotivated __________

Realism of vocational aspirations:
Quite realistic __________
Mildly unrealistic __________
Moderately unrealistic __________
Unrealistic __________

Estimate at end of Workshop training of Client's placeability in open labor market:
Easily placeable __________
Moderately difficult to place __________
Very difficult to place __________
Unplaceable __________

Estimate at end of Workshop training of ability of Client to maintain employment if placed (% of a labor year during which client will maintain employment):
75-100% __________
50- 74% __________
25- 49% __________
0- 24% __________

Kind of employment Client should be expected to sustain (Estimate made at end of Workshop training):
Full time (Regular) __________
Part time (Regular) __________

FORM D - JOC Project on Disabled Workshop Trainees

Date:____________________
Counselor:__________________
Agency:____________________

INITIAL CASE SUMMARY

Name of Client:__________________________ Age:_____ Marital Status:__________

Disability: (Check appropriate category; if physically handicapped also write in specific disability, e.g., deaf, double amputee, etc.)

Primary Disability	Secondary Disability
M.R._____	M.R._____
E.D.M._____	E.D.M._____
E.D.S._____	E.D.S._____
P.D.____________________	P.D.____________________

Source of Referral to Workshop:__________ Length of stay in Workshop:__________

Workshop Recommendation(s) re Employment____

Current Employment Status: Employed:__________ Not Employed:__________

If Employed
Date client started to work__________ Kind of job:____________________
Duties on job:____

How client obtained job (Check one)
JVS___SES___DVR___Private Agency___Family___Friends___Other____________________

Source of Income
Employment___Family___Soc. Sec./or Pension___Relief___Other____________________

Counselor's evaluation of problem areas in which client needs help
(Check as many as are relevant)

1. Finding job_____
2. Maintaining job_____
3. Family relationships_____
4. Social adjustment_____
5. Living arrangements_____
6. Financial_____
7. Personality problems_____
8. Educational and vocational planning_____
9. Other____________________

Counselor's initial plan of service: (Please relate to problems checked above)

Employability Rating Scale, Section II, Counseling, Revised September, 1958

I(LS). LANGUAGE SKILLS

1(LS). Client's ability to read or write English as related to work needs

1. Clearly adequate for work needs. No problems should be created in this area
2. A deficiency is present in either reading or writing skills which may produce moderate but manageable problems in meeting work requirements
3. A deficiency is present in either reading or writing skills which may produce serious problems in meeting work requirements which could be very difficult to manage and which would require special cooperation from a sympathetic employer
4. Inadequate for meeting work requirements. Client's ability to read or write English is below the minimum competence required for his job by even a cooperative and sympathetic employer.

2(LS). Client's ability to speak English as related to work needs

1. Clearly adequate for work needs. No problems should be created in this area
2. Barely adequate for work needs. Some problems may be created in this area which should, however, be manageable
3. Somewhat inadequate for meeting work needs. Client's communication difficulties can be expected to create rather serious problems which might not be manageable without special cooperation from a sympathetic employer
4. Completely inadequate for meeting work requirements. Client's ability to speak English is below the minimum competence required for his job even by a cooperative and sympathetic employer.

3(LS). Client's ability to understand English as related to work needs

1. Clearly adequate for work needs. No problems should be created in this area
2. Barely adequate for work needs. Some problems may be created in this area which should be manageable
3. Somewhat inadequate for meeting work needs. Client's communication difficulties can be expected to create rather serious problems which might not be manageable without special cooperation from a sympathetic employer
4. Completely inadequate for meeting work requirements. Client's ability to understand English is below the minimum competence required for his job even by a cooperative and sympathetic employer.

II(D). DEPENDENCY OF CLIENT

4(D). Present management of daily living--outside help received (including treatment, guidance, advice, but excluding financial aid)

IN THE MANAGEMENT OF HIS OWN AFFAIRS, THE OUTSIDE HELP REQUIRED OR RECEIVED BY THE CLIENT FROM HIS FAMILY OR FROM AN OUTSIDE AGENCY IS:

1. None
2. A very small amount
3. A moderate amount
4. A very large amount.

5(D). Dependency of client on others for financial support

CLIENT PROBABLY EXPECTS TO BE:

1. Completely independent
2. Slightly to moderately dependent
3. Strongly dependent
4. Completely dependent.

6(D). Example set by client's family for dependency or independency on outside financial help

1. Client's family has always been self-supporting
2. One or two members of client's family have set an example of not being self-supporting, but dependent on family or social agencies for all or part of their support
3. Several members of client's family have set examples of substantial dependency on family or social agencies for financial support
4. The example set by the family is that of total or almost total financial dependency for support on outside social agencies.

III(HC). EFFECT OF HANDICAP ON CLIENT

7(HC). Client's tension level revealed during interview

TENSION LEVEL OR NERVOUSNESS REVEALED BY CLIENT DURING INTERVIEW IS:

1. Appropriate
2. Slightly inappropriate
3. Moderately inappropriate
4. Strongly inappropriate.

8(HC). Client's assimilation of handicap

THE DEGREE TO WHICH THE CLIENT HAS LEARNED TO "LIVE WITH" HIS HANDICAP; THAT IS, THE EXTENT TO WHICH HE HAS MADE A DESIRABLE ADJUSTMENT TO IT:

1. High
2. Moderate
3. Slight
4. Negligible.

9(HC). Client's attitude toward handicap as a barrier to his employability

THE DEGREE TO WHICH THE CLIENT'S ATTITUDE TOWARD HIS HANDICAP WILL BE A BARRIER TO HIS EMPLOYABILITY OR PLACEABILITY IS:

1. Negligible or none
2. Slight
3. Moderate
4. Severe.

10(HC). Client's evaluation of vocational limitations imposed by handicap as compared to that of the counselor

CLIENT'S EVALUATION, AS COMPARED TO THAT OF THE COUNSELOR, IS:

1. In agreement
2. Slightly less realistic
3. Moderately less realistic
4. Considerably less realistic.

11(HC). Client's assimilation of the role of a worker

AS A WORKER, THE CLIENT HAS ASSIMILATED:

1. A consistent, conflict-free role
2. A well defined role, but with some moderate degree of conflicts
3. A weak role, in which conflicts are stronger or more numerous
4. No role.

12(HC). Soundness of client's employment demands

CLIENT'S EMPLOYMENT DEMANDS ARE:

1. Realistic and practical
2. Slightly unrealistic or impractical
3. Moderately unrealistic or impractical
4. Highly unrealistic and impractical.

IV(MH). MARKETABILITY OF CLIENT AS RELATED TO HIS HANDICAP

13(MH). Prominence of vocationally handicapping condition (including mental and emotional)

HANDICAP IS:

1. Hidden and cannot be directly observed
2. Hidden and would only be observed episodically
3. Noticeable only after a period of interviewing, and may not be manifest at all times
4. Marked and obvious, noticeable at once, and continually manifest.

14(MH). Acceptability of handicap to average employer

TO THE AVERAGE EMPLOYER, THE CLIENT'S HANDICAP IS LIKELY TO BE:

1. Acceptable
2. Slightly unacceptable
3. Moderately unacceptable
4. Strongly unacceptable.

15(MH). Severity with which handicap limits employment

THE CLIENT'S HANDICAP WOULD:

1. Not limit client to any specific type of work
2. Eliminate a few occupations for client
3. Eliminate most types of work
4. Bar client from all occupations.

16(MH). Anticipated amount of special placement aids required for placing client

THE ANTICIPATED AMOUNT OF PLACEMENT EFFORT REQUIRED FOR CLIENT, USING SPECIAL PLACEMENT AIDS OR TECHNIQUES, WILL BE:

1. None
2. Moderate
3. Considerable
4. Maximal.

V(ER). EMPLOYMENT RECORD OR HISTORY

17(ER). Employment during one year preceding initial contact --number of regular full-time or part-time jobs held successively

1. One
2. Two
3. Three or more
4. None.

18(ER). Employment during one year period preceding initial contact--combined number of months the client was employed at his principal job or in successive principal jobs

CLIENT WAS EMPLOYED:

1. 9 to 12 months of the year
2. 5 to 8 months
3. 1 to 4 months
4. Less than one month, or not at all.

19(ER). Longest single period of full-time employment during one-year period preceding intake

CLIENT WAS EMPLOYED:

1. 9 months and 1 week to 12 months
2. 6 months and 1 week to 9 months
3. 3 months and 1 week to 6 months
4. 3 months or less.

20(ER). Longest single period of unemployment during one-year period preceding intake

CLIENT WAS UNEMPLOYED:

1. 3 months or less
2. 3 months and 1 week to 6 months
3. 6 months and 1 week to 9 months
4. 9 months and 1 week to 12 months.

21(ER). Highest degree of marketable skill ever attained by client

IN AT LEAST ONE VOCATIONAL FIELD THE CLIENT HAS ACQUIRED EITHER FROM SPECIAL TRAINING OR FROM WORK EXPERIENCE, THE FOLLOWING DEGREE OF SKILL:

1. High
2. Moderate
3. Slight
4. None.

22(ER). Estimate of client's loss and retention of skills

CLIENT'S ESTIMATED LOSS OF SKILLS IS:

1. Negligible
2. Slight
3. Moderate
4. Severe.

Y. Client never had special skills.

23(ER). Estimated downgrading of client in status, rank, or earning power, as compared to his previous job which would be required to make placement possible

AS COMPARED TO HIS STATUS, RANK, OR EARNING POWER ON HIS PREVIOUS JOB, THE DEGREE OF DOWNGRADING REQUIRED TO MAKE PLACEMENT POSSIBLE WOULD BE:

1. None
2. Slight
3. Moderate
4. Severe.

Y. Client never was employed.

24(ER). Evaluation of total work history

1. Stable, continuous employment--excellent rating
2. Some lapses; but on the whole rating is good
3. Somewhat irregular; rating is fair
4. Very irregular; rating is poor; or, client has never worked.

25(ER). Evaluation of work history for one year preceding initial contact

1. Stable, continuous employment--excellent rating
2. Some lapses; but on the whole rating is good
3. Somewhat irregular; rating is fair
4. Very irregular; rating is poor; or, client has never worked.

VI(AM). ATTITUDES AND MOTIVATIONS

26(AM). Client's attitude toward the vocational value of his previous schooling

CLIENT'S ATTITUDE APPEARS TO BE:

1. Strongly favorable--he seems to regard his previous schooling as a valuable vocational asset
2. Mildly favorable
3. Neutral or indifferent--client does not seem to attach either positive or negative values to his previous schooling in terms of his present vocational needs or wants
4. Essentially unfavorable. He does not seem to consider his previous schooling to be a vocational asset--he may either feel that his schooling was inadequate or incomplete, or in the wrong field, or that it was actually a handicap to him vocationally.

Y. Client has had no schooling.

27(AM). Acceptance of client by his own family

1. Well accepted by family
2. More accepted than rejected by family
3. More rejected than accepted by family
4. Rejected by family.

Y. Client has no family.

28(AM). Social activities involving friends and associatio outside the home

IN AT LEAST ONE ACTIVITY, CLIENT PARTICIPATES:

1. Frequently
2. Occasionally
3. Rarely
4. Not at all.

29(AM). Client's confidence in himself as a worker

CLIENT'S CONFIDENCE IN HIMSELF AND HIS ABILITY TO HOLD A JOB IS:

1. Highly favorable for employment
2. Favorable for employment
3. Moderately unfavorable for employment
4. Strongly unfavorable for employment.

30(AM). Job-seeking efforts in present period of unemploym

1. Client has made determined search for employm and is continuing to do so
2. Search has been determined but client's initiative is now exhausted
3. Client's job-seeking efforts have always been episodic and half-hearted
4. Client has done no job seeking prior to agency visit.

31(AM). Client's hopefulness for the future for obtaining appropriate work

CLIENT'S ATTITUDE CONCERNING HIS OBTAINING APPROPRIATE WORK IN THE FUTURE IS:

1. Highly hopeful
2. Moderately hopeful
3. Moderately lacking in hope
4. Strongly lacking in hope.

32(AM). Intensity of present drive to work resulting from all internal and external pressures on client

CLIENT'S WORK DRIVE IS:

1. Excellent
2. Good
3. Fair
4. Poor.

VII(GI). APPEARANCE AND GENERAL IMPRESSION ON INTERVIEWER

33(GI). Client's real or apparent age as related to placement in the occupation and at the level preferred by client

FOR EMPLOYMENT IN THE OCCUPATION AND AT THE LEVEL IN THAT OCCUPATION WHICH IS PREFERRED BY CLIENT, THE CLIENT'S REAL OR APPARENT AGE IS:

1. Specially favorable
2. Appropriate, without being specially advantageous
3. Moderately unfavorable, as in being somewhat too young or old
4. Strongly unfavorable, as in being considerably above or below the optimum age for favorable consideration.

34(GI). Race, creed, color, and national origin as handicaps to employment in the occupation being considered for the client. Place of client's group, as compared to other groups

WITH RESPECT TO HIS RACE, CREED, COLOR, AND NATIONAL ORIGIN, THE CLIENT IS A MEMBER OF A GROUP OF WHICH THE IDENTIFIED MEMBERS WOULD PROBABLY ENCOUNTER:

1. Minimal resistance to employment
2. Some mild resistance to employment
3. Some moderate to strong resistance to employment
4. Some strong to very strong resistance to employment.

35(GI). Race, creed, color and national origin as handicaps to employment in the occupation being considered for the client. Client's place in his own group

AS COMPARED WITH THE AVERAGE MEMBER OF HIS OWN GROUP, THE CLIENT'S RACE, CREED, COLOR, AND NATIONAL ORIGIN WOULD PROBABLY HANDICAP HIS EMPLOYMENT:

1. Minimally
2. Somewhat less than average
3. About average
4. Somewhat more than average.

36(GI). Client's participation in interview

CLIENT'S RESPONSE TO COUNSELOR, AND CLIENT'S EXPRESSION OF NEEDS AND DEMANDS, DISCUSSION OF PROBLEMS, AND ANSWERING OF QUESTIONS, IS:

1. Excellent
2. Good
3. Fair
4. Poor.

37(GI). Evaluation of the client's general appearance as related to predicted placeability in the occupation deemed most feasible by the counselor

AS COMPARED TO THE AVERAGE PERSON IN THE OCCUPATION WHICH IS BEING CONSIDERED FOR THE CLIENT, THE CLIENT'S GENERAL APPEARANCE IS:

1. Better than average
2. About average
3. Somewhat below average
4. Considerably below average.

38(GI). Overall impression of client upon interviewer (on the basis of the goals set up in the interview)

THE WAY IN WHICH THE CLIENT RELATES TO THE COUNSELOR, THE MATURITY OF THE CLIENT'S APPROACH, HIS UNDERSTANDING OF HIS PROBLEMS, HIS APPARENT ABILITY TO DO THE THINGS HE IS REQUESTING, IS:

1. Excellent
2. Good
3. Fair
4. Poor.

VIII(MP). MARKETABILITY OF CLIENT AS RELATED TO PLACEMENT

39(MP). Availability in active order file of job orders suitable for client

1. Many (9 or more)
2. A moderate number (4-8)
3. A few (1-3)
4. None.

40(MP). Number of suitable job orders to which the client is exposed or referred at first visit (i.e., which are discussed with him or on which he is sent out as an applicant)

1. Many (9 or more)
2. A moderate number (4-8)
3. A few (1-3)
4. None.

41(MP). Marketability of client's vocational assets

IN THE FIELD IN WHICH THE CLIENT HAS HIS BEST VOCATIONAL ASSETS, THE MARKET CONDITIONS, FOR CLIENTS OF AT LEAST AVERAGE EMPLOYABILITY, ARE SUCH THAT:

1. There are more jobs than applicants
2. There are about as many jobs as applicants
3. There is a moderate scarcity of jobs
4. There is a large scarcity of jobs.

IX(OE). OVERALL EVALUATION: AGENCY CRITERIA

42(OE). Predicted ease or difficulty of placement of client

1. A regular placement through the use of the routine procedures of the counselor should be relatively easy to make
2. A regular placement through the use of the routine procedures of the counselor should be possible to make, but with considerably more difficulty
3. Specialized placement procedures will probably be required of the counselor, involving the use of special services such as the following: extensive solicitation; advertising; field worker activities; employer interviews, etc.
4. Specialized placement procedures will probably be of no avail, but a favorable prognosis for placement can be made if the client is put through the workshop program
5. Even if the client is put through the workshop program only a doubtful or guarded prognosis for placement can be made.
6. The client is probably unplaceable in any type of employment even if all of the agency resources, including the workshop program, are utilized.

43(OE). Predicted work competence of client in job field deemed most feasible by counselor

1. Highly competent--above average for employed workers
2. Moderately competent--below average for employed workers
3. Minimally competent--just meets minimal regular work standards
4. Slightly less than minimally competent--slightly below regular work standards but just meets standards for sheltered workshops
5. Considerably below minimal standards of competence --considerably below regular work standards--slightly below sheltered workshop standards
6. Very considerably below minimal standards of competence--for both regular work and sheltered workshop standards.

44(OE). Predicted ability to maintain employment in job field deemed most feasible by counselor

PROGNOSIS IS:

1. Excellent
2. Good
3. Fair
4. Poor.

45(OE). Predicted work personality in job field deemed most feasible for client by counselor

1. Adequate
2. Slightly inadequate
3. Moderately inadequate
4. Strongly inadequate.

Name of Client____________________ Date Administered____________________

Counselor ____________________ Agency ____________________

FORM E - JOC Project on Disabled Workshop Trainees

SIX MONTH FOLLOW-UP SCHEDULE

Date:_____________
Counselor:__________
Agency:____________

Name of Client:_________________________

Marital Status:___________
(Fill out only if there has been a change)

I. EMPLOYMENT

A. Number of jobs held since last report (Check one)

1. None_____ 2. One_____ 3. Two_____ 4. Three or more_____

B. Current Employment Status (Check one)

1. Employed on same job as previously reported _____
2. Employed on new job since previously reported _____
3. Unemployed--lost previous job _____
4. Unemployed--never worked _____

C. Lost Previous Jobs Because of Following Reasons:

	JOB 1	JOB 2	JOB 3	JOB 4	JOB 5
1. Laid off	_____	_____	_____	_____	_____
2. Fired	_____	_____	_____	_____	_____
3. Hospitalized	_____	_____	_____	_____	_____
4. Quit	_____	_____	_____	_____	_____
5. Temporary	_____	_____	_____	_____	_____
6. Other	_____	_____	_____	_____	_____

II. ATTITUDES TOWARDS:

	EMPLOYMENT	EMPLOYER	CO-WORKERS
Good	_______	_______	_______
Fair	_______	_______	_______
Poor	_______	_______	_______

III. PROBLEMS CONTRIBUTING TO VOCATIONAL MALADJUSTMENT
(Check as many as applicable)

1. Family _____
2. Financial _____
3. Social _____
4. Personality _____
5. Health _____
6. Other _____

IV. PRESENT PLAN OF SERVICE

A. Counseling Contacts (Check one)

1. Intensify counseling contacts _____
2. Maintain same number of contacts _____
3. Lessen counseling contacts _____
4. No contact _____

B. Focus on following problem area(s) (Check as many as applicable)

1. Job adjustment _____
2. Family relationships _____
3. Financial problems _____
4. Personality problems _____
5. Social problems _____
6. Health _____
7. Other _____

FORM E - Page 2

THIS SECTION TO BE FILLED IN ONLY FOR THOSE CASES OPENED PRIOR TO APRIL 1, 1966

V. MAJOR PROBLEMS DEALT WITH OR ACTIONS TAKEN BY COUNSELOR
(Check as many as applicable)

__________Made job referral

__________Called employer re job problems

__________Visited client on job to help in job problems

__________Gave advice on problems raised by client; specify:____________________

____

____

__________Arranged for training program

__________Made referral to other services; specify:____________________

____

__________Contacted family member(s)

__________Arranged to make home visit

__________Helped client in other ways; specify:____________________

____

____

VI. SIX MONTH FOLLOW-UP EMPLOYMENT RECORD

A. First Job

1. How obtained (Please check)
JVS___DVR___Family___Friends___Self___Other (Please specify)_______

2. Full Time___Part Time___ (Please check)

3. Type of Work (Please check)
Clerical_____Service_____Skilled_____Semi-skilled_____Unskilled____
Other____________________ (Please specify)

4. Earnings (Please check)
Below $.50 per hour__$1.01-$1.25 per hour__$1.51 & over per hour___
$.51-$1.00 per hour__$1.26-$1.50 per hour__Other (Specify)_________

5. Number of months on job (Please check)
Less than 1 mo.___ 1 mo.___ 2 mos.___ 3 mos.___ 4 mos.___ 5 mos.___
6 mos.___

6. Major problems on job (Please check)
a. Physical demands too great___
b. Interpersonal relationships___
c. Lack of skill___
d. Lack of motivation___
e. Distractible___
f. Too slow___
g. Socializes too much___
h. Lack of advancement___
i. Wants more money___
j. Family problems interfere___
k. Other (Please specify)______________

B. Second Job

1. How obtained (Please check)
JVS___DVR___Family___Friends___Self___Other (Please specify)_______

2. Full Time___Part Time___ (Please check)

3. Type of Work (Please check)
Clerical_____Service_____Skilled_____Semi-skilled_____Unskilled____
Other____________________ (Please specify)

4. Earnings (Please check)
Below $.50 per hour__$1.01-$1.25 per hour__$1.51 & over per hour___
$.51-$1.00 per hour__$1.26-$1.50 per hour__Other (Specify)_________

5. Number of months on job (Please check)
Less than 1 mo.___ 1 mo.___ 2 mos.___ 3 mos.___ 4 mos.___ 5 mos.___
6 mos.___

6. Major problems on job (Please check)
a. Physical demands too great___
b. Interpersonal relationships___
c. Lack of skill___
d. Lack of motivation___
e. Distractible___
f. Too slow___
g. Socializes too much___
h. Lack of advancement___
i. Wants more money___
j. Family problems interfere___
k. Other (Please specify)______________

FORM E - Page 4

C. Third Job

1. How obtained (Please check)
JVS___DVR___Family___Friends___Self___Other (Please specify)______

2. Full Time___Part Time___ (Please check)

3. Type of Work (Please check)
Clerical_____Service_____Skilled_____Semi-skilled_____Unskilled____
Other____________________ (Please specify)

4. Earnings (Please check)
Below $.50 per hour__$1.01-$1.25 per hour__$1.51 & Over per hour___
$.51-$1.00 per hour__$1.26-$1.50 per hour__Other (Specify)_________

5. Number of months on job (Please check)
Less than 1 mo.___ 1 mo.___ 2 mos.___ 3 mos.___ 4 mos.___ 5 mos.___
6 mos.___

6. Major problems on job (Please check)
   - a. Physical demands too great___
   - b. Interpersonal relationships___
   - c. Lack of skill___
   - d. Lack of motivation___
   - e. Distractible___
   - f. Too slow___
   - g. Socializes too much___
   - h. Lack of advancement___
   - i. Wants more money___
   - j. Family problems interfere___
   - k. Other (Please specify)______________

VII. AMOUNT OF TIME CLIENT WAS AVAILABLE FOR EMPLOYMENT DURING ENTIRE PERIOD (Check)

1 mo.____ 2 mos.____ 3 mos.____ 4 mos.____ 5 mos.____ 6 mos.____ None_____

VIII. IF CLIENT WAS NOT AVAILABLE FOR EMPLOYMENT AT ANY TIME DURING THIS PERIOD

A. Illness (Ordinary)___
B. Institutionalization___
C. Marriage & family responsibility___
D. Pregnancy___
E. Training or school___
F. Return to workshop___
G. Armed forces___
H. Other_______________

IX. IF CLIENT'S AND EMPLOYER'S REASON FOR LOSS OF JOB DIFFERS PLEASE INDICATE

	Reason given by client	Reason given by employer
First Job	__________________________	__________________________
Second Job	__________________________	__________________________
Third Job	__________________________	__________________________

FORM F - JOC Project on Disabled Workshop Trainees

Agency________________
Counselor______________

SIX-MONTH FOLLOW-UP SCHEDULE

1. Name of Client____________________________ 2. Date____________

3. Address__________________________________ 4. Telephone________

5. Period covered (dates) From________________ To________________

6. Is Client presently employed? Yes________ No________

If Yes, ask questions 7 through 11:

7. Name and address of company____________________________________

8. Date client started job__________ 9. Kind of job________________

10. Duties on job____

____

11. Works how many hours a week_______ 12. Earnings________________

13. How job obtained (check 1 box)

thru JVS ☐
thru State Employment Service ☐
thru DVR ☐
thru private employment agency ☐
thru friends of relatives ☐
thru other sources ☐

If client is not employed, or if employment as given above does not cover the entire 6 months' period, ask the following questions:

14. Number of jobs held during this 6 months' follow-up period____________

15. Dates, or amount of time worked on each:

1st job________________________
2nd job________________________
3rd job________________________

(Continue on back of page if more than 3 jobs)

15. Type of work performed on each:

1st job________________________
2nd job________________________
3rd job________________________

(Continue on back of page)

FORM F - Page 2

16. Reason for termination of each job:

1st job____

2nd job____

3rd job____

(Continue on back of page)

17. If currently unemployed, client's present labor force status:

Actively seeking employment__________

No active search, but available__________

Not in labor force because:

Housewife__________

Student__________

Sheltered workshop or institution__________

Armed forces__________

Other (explain)____

____

18. Amount of time client was available for employment during this 6 month period.

FORM G - JOC Project on Disabled Workshop Trainees

Case No.______ BRIEF RECORDING FORM FOR COUNSELING CONTACT

Name of Client________________________ Date__________ Counselor____________

After each counseling contact, please make appropriate check marks which summarize the critical issues of the counseling session under headings I, II and III. Under IV Qualitative Observations add any notes that seem appropriate and desirable.

I. Problems Raised by Client

__________asked for help in finding a job

__________experiencing difficulty in keeping up with work requirements

__________having trouble with supervisor

__________having trouble with co-workers

__________feels is underpaid

__________feels job too hard

__________trouble getting to work on time

__________feels is discriminated against

__________brings up problems in other life areas; specify:

____

__________other problems; specify:

____

____

II. How Client Tries to Meet Problems

__________talks to supervisor

__________talks to co-workers

__________tells people off

__________avoids people

__________does nothing

FORM G - Page 2

NAME OF CLIENT________________________

__________quits job

__________actively seeking employment

__________just sits home

__________trying to get help from other social or professional sources; specify:

____

__________trying to get more training

__________seeks counselor

__________other____

____

____

III. Major Problems Dealt with or Actions Taken by Counselor

__________made job referral

__________called current employer re job problems

__________visited client on job to help in job problems

__________counseled on problems raised by client; specify:

____

____

__________arranged for training program

__________made referral to other services; specify:

____

__________contacted family member(s)

__________arranged to make home visit

__________helped client in other ways; specify:

____

____

FORM G - Page 3

NAME OF CLIENT__________________________

IV. Qualitative Observations

(Use this space for any notes which may help to clarify the previous check-list or are needed to describe the dominant quality of the session particularly any incidents or interventions that you would consider to be critical to the success or failure of this case.)

APPENDIX III

FACILITIES

APPENDIX III

FACILITIES

THE JEWISH OCCUPATIONAL COUNCIL (JOC) was designated as the agency for the project with responsibility for maintaining fiscal records, supervising the service program, analyzing data and preparing the progress and final reports.

JOC was organized in 1939 as the national coordinating and consultative agency operating on behalf of the organized Jewish community in the field of vocational adjustment. The membership consists of 5 national Jewish organizations, 25 local Jewish vocational services and 1 regional agency.

It organizes and sponsors regular conferences for the professional staff and lay leadership of its member agencies, conducts surveys on operational problems of the member agencies and studies the vocational trends and problems affecting the Jewish and general communities. It organizes periodic seminars, engages in recruitment of professional staff for member agencies, conveys information on legislation referring to employment, vocational rehabilitation and education, consults with governmental and national voluntary agencies in the development of programs in these fields.

It serves as a clearing house for programmatic information and materials, publishes a Program and Information Bulletin, Vocational Abstracts of articles and research reports by professional staff members of JVS agencies, statistical reports on the activities of its member agencies, and surveys of policies and practices of sheltered workshops. Practices and problems of JVS sheltered workshops are recurring themes at JOC annual conferences.

JEWISH VOCATIONAL SERVICE AGENCIES (JVS's)

The following agencies provided the site, the clients served in the program and the project field staff.

THE BOSTON JEWISH VOCATIONAL SERVICE, which was founded in 1938, is accredited by the American Board on Professional Standards in Vocational Counseling. Its Work Adjustment Center has been in operation since 1957. The agency operates on a non-sectarian basis offering services to any person within the Greater Boston area. It is a member of the Combined Jewish Philanthropies, has cooperative working relationships with the Massachusetts Rehabilitation Commission, the Veterans Administration, hospitals, clinics and other agencies in the Boston area. It serves as a training center for rehabilitation students at Northeastern University.

In 1967 educational counseling, vocational and career planning, group guidance, job placement, psychological testing, scholarship and small business loans and vocational rehabilitation services were made available to approximately 1,600 persons.

THE WORK ADJUSTMENT CENTER has expanded rapidly during the past year and expects to be serving 100 individuals on a daily basis. During 1967 it served 168 persons. The population currently being served includes those with the following disabilities: emotional disturbances, mental retardation, cerebral palsy, multiple sclerosis, brain damage, epilepsy, strokes. The average length of stay is 3 to 6 months, but this may be longer depending on individual need.

The workshop is staffed by foremen at a ratio of 1 to 15 clients and rehabilitation counselors at the same ratio to clients. The work performed is primarily assembly, clerical, machine operation, die cutting. There is also a redemption program. Clients are paid on a piece rate basis. Most work a full day, but this can be varied to meet individual needs.

Placement starts while the client is still in the workshop. Both placement and follow-up counseling are provided by the rehabilitation counselor who provides service during the client's stay in the workshop.

Supervisor and counselors are professionally trained. The production foreman has an industrial background. Other foremen positions are filled by selected clients and work study students. The shop manager is an industrial engineer.

THE CHICAGO JEWISH VOCATIONAL SERVICE has provided increasingly diversified vocational services since its establishment in 1884. It is accredited by the American Board on Professional Standards in Vocational Counseling, is affiliated with the Jewish Federation of Metropolitan Chicago and is a member of the Welfare Council of Metropolitan Chicago. Its activities are supported by the Jewish Federation, the Community Fund, the Illinois Division of Vocational Rehabilitation and the Illinois Department of Mental Health. It made available educational and vocational counseling, job placement, psychological testing, scholarship screening, group counseling and vocational rehabilitation services to approximately 7,000 persons in 1967.

The agency has been formally involved in rehabilitation since 1951 with the initiation of its pioneering Vocational Adjustment Center which received a Presidential citation and was chosen as a prototype program for work with the emotionally disturbed by the Social and Rehabilitation Service (then the Office of Vocational Rehabilitation). The agency also operates the Work Therapy Center for chronically ill mental patients, a neighborhood based, long-term workshop for older persons, and the Vocational Development Center for emotionally disturbed and mentally retarded adolescents. The agency maintains a research department which conducts research in connection with these various rehabilitation facilities. There is an internship training program with Michigan State University, De Paul University, and Illinois Institute of Technology.

THE VOCATIONAL ADJUSTMENT CENTER serves approximately 200 clients a year. The average number of clients at any time is 28. It accepts persons with emotional, intellectual, physical and social disabilities between the ages of 16 and 60. The average length of stay is between 2 to 10 weeks, with periodic evaluations made to determine progress and continued stay.

The workshop is staffed by counselor-foremen and counselors. There is a ratio of one counselor-foreman to 5 or 6 clients. The ratio of counselors to clients is difficult to estimate, since counselors have the continuing responsibility for placement and counseling of clients who complete workshop training.

The work performed is basically simple assembly, packaging, stock, messenger and some simple clerical and machine operation. Clients are paid an hourly rate, work 6 hours a day.

Workshop counselors who carry a case during the program continue with job placement and follow-up counseling. There is both a pre and post group counseling program.

Supervisors, foremen-counselors and counselors are professionally trained.

THE DETROIT JEWISH VOCATIONAL SERVICE AND COMMUNITY WORKSHOP was established in 1942 and set up a separate workshop facility, the Community Workshop, in 1954. Both agency and workshop were incorporated in 1966. The agency is accredited by the American Board on Professional Standards in Vocational Counseling. It is a member of the Detroit Jewish Federation and has cooperative working relationships with the Michigan Division of Vocational Rehabilitation and other agencies in the community. It serves as a training center for students in rehabilitation counseling programs at Michigan State and Wayne State Universities.

In 1967 it made available educational and vocational counseling, psychological testing, job placement, scholarship aid and vocational rehabilitation services to approximately 1,500 persons. It is currently completing a federally funded project which evaluated the employability of certain levels of the emotionally disturbed.

COMMUNITY WORKSHOP served approximately 150 clients this past year, but has increased its capacity to accommodate 200. The average number of clients at a given time is 50. It serves primarily the mentally retarded and emotionally disturbed between 17 and 40 years of age, but also has some physically handicapped persons, including the deaf and epileptics. There is a 4 week prevocational period of evaluation followed by work adjustment training up to 13 weeks. The average length of stay for a client is 14 weeks.

The ratio of foremen to clients is 1 to 19 and of counselors to clients 1 to 10. The work performed is primarily packing, assembly, mailing. Clients work from 8:30 a.m. to 3:30 p.m. and are paid an hourly wage of 45¢ to 65¢ an hour.

The workshop has a work sampling unit, offers individual and group counseling, maintains a grooming clinic and provides a placement counselor who begins placement while the client is still in the shop and follows up with clients for 3 months.

The workshop director and counselors are professionally trained, the placement counselor is a college graduate and the business manager and foremen have an industrial background. Interns from Michigan and Wayne State serve as counselors- and evaluators-in-training.

THE KANSAS CITY JEWISH VOCATIONAL SERVICE was founded in 1949 and established its workshop in 1958. The agency is accredited by the American Board on Professional Standards in Vocational Counseling. It is a member of the Kansas City Jewish Federation and has close working relationships with the Kansas and Missouri Divisions of Vocational Rehabilitation and with other agencies in the community.

In 1967 the agency provided educational and vocational counseling, psychological testing, job placement and vocational rehabilitation services to approximately 600 persons. The agency has been or is currently involved in a number of federally funded research and demonstration programs for the older worker, out of school youth, and handicapped adolescents; recently received a Workshop Improvement Grant which has permitted staff expansion.

THE RETRAINING WORKSHOP serves approximately 225 persons a year and an average of 40 persons a day. It serves clients 16 years of age and over with all types of disabilities, but the largest single group is the emotionally disturbed over 45 years of age. There is an extended work program for clients over 65 years who have physical and emotional problems. Training may last up to 18 weeks, but the average stay (excluding the disabled aged) is 5 weeks.

The ratio of foremen to clients is 1 to 15 and of counselors to clients the same. The work performed is primarily packaging, packing, assembly, folding, stapling, gluing, shipping, some spray painting and machine operation. Clients work a 6 hour day, with part-time schedules arranged in accordance with medical limitations and other factors. Clients are paid on an hourly and piece rate basis.

The supervisor and counselors are professionally trained. The foremen and stockman have industrial backgrounds. The same counselor who sees clients during the workshop program provides placement and any needed follow-up. Counselors are not part of the workshop staff and are housed at the JVS office.

THE LOS ANGELES JEWISH VOCATIONAL SERVICE was founded in 1931 and incorporated its workshop, known as Handcraft Industries, in 1952. The agency is accredited by the American Board on Professional Standards in Vocational Counseling. It is a member of the Jewish Federation-Council of Greater Los Angeles, has cooperative working relationships with the California State Department of Vocational Rehabilitation. It works closely with other community agencies and recently concluded a joint research project on the rehabilitation of post-mental hospital patients. The agency is now cooperating on a research project on the vocational rehabilitation of cardiac patients. It is currently involved in developing a special job placement program for older workers. It has an internship training program with California State College at Los Angeles.

In 1967 it made available vocational counseling, job placement, psychological testing and vocational rehabilitation services to approximately 4,000 persons.

HANDCRAFT INDUSTRIES serves approximately 120 clients a year, with an average of 30-35 clients at any one time. It serves primarily mentally retarded, physically disabled, emotionally disturbed and disabled aged individuals from 16 and up. The average length of stay is from 3 to 4 months. The ratio of foremen to clients is 1 to 8, of counselors to clients 1 to 15. The work performed is assembly, packing, machine operation, plastic forming and molding. Clients are paid on an hourly basis, work a full day.

Clients are provided with individual and group counseling. Placement is provided by the workshop counselor while the client is still in the workshop and supplemented by the agency placement department. The workshop counselor also does follow-up counseling.

The workshop director and counselor are professionally trained, the foremen have industrial backgrounds.

THE MILWAUKEE JEWISH VOCATIONAL SERVICE was founded in 1939 and is accredited by the American Board on Professional Standards in Vocational Counseling. It is a member of the Jewish Federation of Milwaukee and has cooperative working relationships with the State Division of Rehabilitation, the State Division of Mental Hygiene, the Milwaukee public school system and a number of local agencies. It serves as a training center for students in social work, and workshop administration, at the University of Wisconsin; for students in counseling psychology and the medical school at Marquette University; and has a special training program for sub-professional rehabilitation personnel with the University of Wisconsin. During 1967 it made available educational and vocational counseling, psychological testing, job placement, tutoring, training, recreational and vocational rehabilitative services to approximately 3,000 clients.

The agency has completed a number of research and demonstration programs on the aged, the emotionally disturbed, the cerebral palsied, the mentally retarded, physically handicapped and juvenile delinquents. It is currently involved in a research project to develop a model program for a "continuum of care" and a "fixed point of referral" approach to total community services for the retarded.

THE WORK ADJUSTMENT INSTITUTE serves approximately 800 clients a year, has about 350 in its various shops at any one time. This includes an extended placement shop. It serves the mentally retarded, emotionally disturbed, cerebral palsied and others with neurological difficulties, physically handicapped and disabled aged. The age range is 16 and up, except for a special program for emotionally disturbed school youth which deals with 14 to 16 year olds. There is no restriction regarding length of stay. A client may remain until placed in sheltered or community employment. The average length of stay is 6 to 9 months.

The ratio of foremen to clients is 1 to 15 and of counselors to clients 1 to 20. The work performed is small assembly, hand and machine packaging, printing, mailing, shipping, building maintenance. The work day is 6 to 7 hours, with most clients working a full day. Those in the school-work program spend a half day in the workshop and a half day at school. Clients are paid an hourly rate based on a piece work formula. There is also a bonus system.

The workshop offers individual and group counseling, remedial reading, a grooming class, training in switchboard and typing, clerical and bookkeeping refresher courses. Placement is performed by the JVS placement department under supervision of the counselor who also provides follow-up counseling.

Counselors are all professionally trained. The foreman (training supervisors) and assistant foreman have an industrial or related background.

THE FEDERATION EMPLOYMENT AND GUIDANCE SERVICE OF NEW YORK CITY was founded in 1934 and is the largest voluntary vocational service agency in the country. It is accredited by the American Board on Professional Standards in Vocational Counseling. It is a member of the Federation of Jewish Philanthropies of New York City, has worked closely with the New York State Division of Vocational Rehabilitation for many years, and has cooperative relationships with a number of agencies in the New York area.

The agency established a pioneering project for the rehabilitation of the disabled aged, which was chosen as a prototype program by SRA (then Office of Vocational Rehabilitation). It has engaged in a number of projects for the emotionally disturbed, the mentally retarded and the socially maladjusted, is currently involved in a research program for adult retardates. It maintains 2 extended term neighborhood workshops in addition to the Central Workshop.

In 1967 it made available educational and vocational counseling, job placement, psychological testing, group guidance and vocational rehabilitation services to approximately 20,000 persons.

THE CENTRAL WORKSHOP serves approximately 200 clients per year with an average of 70 at any one time. There is no policy regarding length of stay, but the average is 15 weeks. The populations primarily being served are clients 50 and over with all disabilities (except those who are blind and deaf), and adult retardates.

The workshop is staffed by foremen at a ratio of 1 to 25 clients and rehabilitation counselors at the same ratio to clients. Work performed is primarily assembly and packaging. Clients are paid on a piece rate basis, may work either a 4 hour or a 6 hour day.

Workshop supervisor and counselors are professionally trained. Foremen have industrial experience. Special programs include a work sampling unit and group counseling. A special placement counselor is assigned to the workshop to effect placement for workshop trainees.

THE JEWISH VOCATIONAL SERVICE OF ESSEX COUNTY (NEWARK) was founded in 1946 and is certified by the American Board on Professional Standards in Vocational Counseling. It is a member of the Jewish Community Council of Essex County, has a cooperative working agreement with the New Jersey Rehabilitation Commission to provide service to emotionally handicapped clients referred by the Commission, and works closely with other agencies in the community. It has an internship training program with Seton Hall University. The agency has engaged in a number of research and demonstration projects in cooperation with the federal, state and county governments.

In 1967 educational and career counseling, group guidance, job placement, psychological testing, scholarship screening and vocational rehabilitation services were made available to approximately 600 clients.

THE OPPORTUNITY WORKSHOP serves approximately 120 clients a year, with an average number of 50 at any one time. Clients are primarily the emotionally disturbed and those with neurological impairments--brain damage, epileptics, etc. There is also a group of disabled aged clients who are in the workshop on an extended basis. The average length of stay (exclusive of the disabled aged) is 5 months, with the maximum a year. In exceptional circumstances this may be extended.

In the evaluation unit the ratio of evaluators to clients is 1 for every 6 clients. In the work adjustment unit the ratio of foremen to clients is 1 for every 10 clients, and 1 counselor for every 10 clients. Work performed is light assembly, packaging, collating, gluing, folding, stapling, heat sealing. Clients are paid on an hourly and piece rate basis. The regular work day is 6-1/2 hours, and may be modified to suit individual client needs.

The agency counselor who sees the client during his stay in the workshop is responsible for placement which begins while the client is still in the workshop. Special services include a work sampling program within the evaluation unit, and group counseling. Special remedial services are arranged as needed.

Supervisors and counselors are professionally trained. The two evaluators are currently enrolled in a graduate rehabilitation counselor training program. Foremen have an industrial background.

THE PHILADELPHIA JEWISH EMPLOYMENT AND VOCATIONAL SERVICE was founded in 1941 and is accredited by the American Board on Professional Standards in Vocational Counseling. It is affiliated with the Federation of Jewish Agencies of Greater Philadelphia, and has cooperative working relationships with the Pennsylvania Bureau of Vocational Rehabilitation, the Pennsylvania State Employment Service, the Philadelphia school system and several major hospitals and institutions concerned with vocational problems of the physically disabled, emotionally disordered, mentally retarded, older workers, school dropouts, the disadvantaged and the socially maladjusted. It has engaged in a number of projects concerned with these disability groups. It serves as a training center for doctoral students in counseling psychology, and for Masters degree students in rehabilitation counseling at Temple University.

In 1967 it made available vocational counseling, psychological testing, job placement, scholarship screening and vocational rehabilitation services to approximately 7,500 persons, serving mainly the disabled population of the Philadelphia area. In addition to the Work Adjustment Center, the agency operates a work evaluation center and is a participant in the Philadelphia Employment Development Corporation.

WORK ADJUSTMENT CENTER serves approximately 700 individuals a year with an average of 200 at any one time. It serves the emotionally disturbed, physically handicapped, mentally retarded, older disabled worker, culturally deprived youth and potential school dropouts. Length of stay varies from 4 weeks to 26 weeks, with the average being 3 months.

The ratio of foremen to clients is 1 to 25 and of counselors to clients 1 to 11. In addition there are 2 social workers, 2 reading specialists, 1 reading teacher, all of whom are professionally trained, 3 trainers with a B.A. or equivalent trade experience. Supervisors and counselors are all professionally trained. Foremen have industrial experience.

Work performed is assembly, packing, bindery, woodworking, needle trades and machine shop. Auxiliary programs include remedial reading and arithmetic, group counseling, social casework, special trade training for entry level jobs or further trade training. Method of payment is primarily on a piece rate. There are both full time (6 hours) and part-time (3 hours) programs.

Counselors (counseling psychologists) are attached to the workshop. Placement is handled by 2 counselors assigned to the workshop who operate out of the JEVS office. Placement begins while the client is in the workshop.

THE ST. LOUIS JEWISH EMPLOYMENT AND VOCATIONAL SERVICE was founded in 1940 and is accredited by the American Board on Professional Standards in Vocational Counseling. It is affiliated with the Jewish Federation of St. Louis and has cooperative relations with the Missouri and Illinois Divisions of Vocational Rehabilitation and the Missouri State Bureau for the Blind to serve individuals in all categories of handicap and disability.

The agency has been or is currently involved in a variety of federally funded projects offering rehabilitation services to older handicapped workers; to mental retardates in their last year of school, to multiply handicapped deaf persons; to school dropouts and the culturally deprived; specialized skill training for the handicapped and the adaptation of industrial training resources for the vocational rehabilitation of mental retardates. In addition to the Rehabilitation Workshop it operates the Work Experience Center, the Jewish Vocational Workshop and a Youth Training Center.

In 1967 it made available vocational counseling, job placement, psychological testing, vocational training and vocational rehabilitation services to more than 5,000 persons.

REHABILITATION WORKSHOP serves 700 clients per year, the average being 75 at any one time. Persons 16 and over with physical, emotional, intellectual and multiple handicaps are served, including the deaf and the visually handicapped. There is no specific policy regarding length of stay, the average being 3 to 8 weeks.

The ratio of foremen to clients is 1 to 25 and of counselors 1 to 13. Counselors are not considered part of the workshop staff, although they maintain offices in the workshop. The work performed is primarily assembly, packing, packaging, shipping. Clients work a 7 hour day and are paid on an hourly rate.

Supervisor and counselors are professionally trained, as is the placement specialist. Foremen have industrial backgrounds. The program provides individual and group counseling. Clients are referred to the placement specialist while still in the workshop. If special difficulties are anticipated in placing a client, he is retained by the counselor who has been working with him during his stay in the workshop. Group counseling is offered clients while in the workshop.